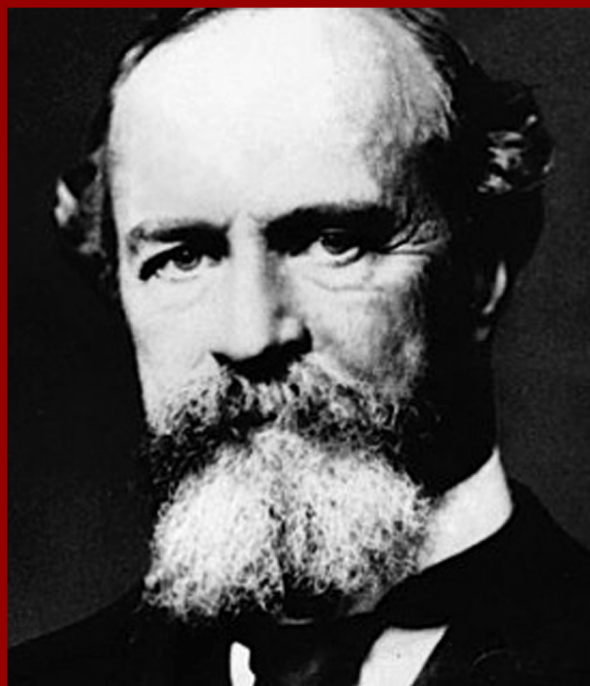




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Person of the Issue



William James (1842-1910)

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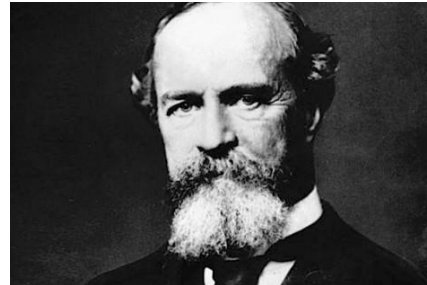


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Person of the Issue: William James (1842-1910)

Ankit Patel¹

Born	January 11, 1842 New York City, New York
Died	August 26, 1910 (aged 68) Tamworth, New Hampshire
Alma mater	Harvard University
Religion	Western Philosophy
Era	19th/20th century philosophy Pragmatism
School	Functional psychology Radical empiricism
Main interests	Pragmatism, psychology, philosophy of religion, epistemology, meaning



William James was an original thinker in and between the disciplines of physiology, psychology and philosophy. His twelve-hundred page masterwork, *The Principles of Psychology* (1890), is a rich blend of physiology, psychology, philosophy, and personal reflection that has given us such ideas as “the stream of thought” and the baby’s impression of the world “as one great blooming, buzzing confusion” (PP 462). It contains seeds of pragmatism and phenomenology, and influenced generations of thinkers in Europe and America, including Edmund Husserl, Bertrand Russell, John Dewey, and Ludwig Wittgenstein. James studied at Harvard’s Lawrence Scientific School and the School of Medicine, but his writings were from the outset as much philosophical as scientific. “Some Remarks on Spencer’s Notion of Mind as Correspondence” (1878) and “The Sentiment of Rationality” (1879, 1882) presage his future pragmatism and pluralism, and contain the first statements of his view that philosophical theories are reflections of a philosopher’s temperament.

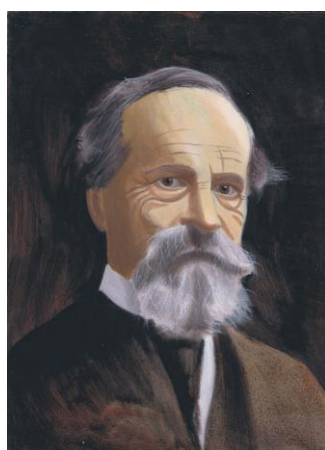
William James was born in New York City on January 11, 1842, into an intellectual household; his father was a philosopher and his brother, Henry James, grew up to become a renowned novelist. After medical school, James focused on the human psyche, writing a masterwork on the subject, entitled *The Principles of Psychology*. He later became known for the literary piece *The Will to Believe and Other Essays in Popular Philosophy*, which was published in 1897. James died on August 26, 1910, in Chocorua, New Hampshire.

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Person of the Issue William James (1842-1910)

James hints at his religious concerns in his earliest essays and in *The Principles*, but they become more explicit in *The Will to Believe and Other Essays in Popular Philosophy* (1897), *Human Immortality: Two Supposed Objections to the Doctrine* (1898), *The Varieties of Religious Experience* (1902) and *A Pluralistic Universe* (1909). James oscillated between thinking that a “study in human nature” such as *Varieties* could contribute to a “Science of Religion” and the belief that religious experience involves an altogether supernatural domain, somehow inaccessible to science but accessible to the individual human subject.

James made some of his most important philosophical contributions in the last decade of his life. In a burst of writing in 1904–5 (collected in *Essays in Radical Empiricism* (1912)) he set out the metaphysical view most commonly known as “neutral monism,” according to which there is one fundamental “stuff” that is neither material nor mental. In “A Pluralistic Universe” he defends the mystical and anti-pragmatic view that concepts distort rather than reveal reality, and in his influential *Pragmatism* (1907), he presents systematically a set of views about truth, knowledge, reality, religion, and philosophy that permeate his writings from the late 1870s onwards.



[Portrait of William James © Darren McAndrew 2014]

William was precocious, highly intelligent, aware that he had no need to earn a living, yet very competitive with brother Henry and determined to seek distinction. Showing some skill in drawing, he first studied painting as a pupil of the well-known artist William Hunt, but soon abandoned hopes of an artistic career. However, it's clear that he had a well-developed artistic sensibility, and his later writings show an emotional sensitivity and a gift for metaphor and picturesque description. It was equally clear that he sought a greater distinction than he felt his artistic gifts could guarantee. In the end he chooses to study medicine, enrolling in 1861 in the Lawrence Scientific School at Harvard to study chemistry and comparative anatomy.

James then entered Harvard Medical School in 1864, but, under no pressure to qualify in order to practice, and still unsure of what he really wanted to become, he interrupted his medical studies twice. In 1865 he joined the famous Harvard biologist Louis Agassiz on an expedition to the Amazon to collect specimens for a new zoological museum. After resuming his studies he took another break, partly because of ill health and partly because he wanted to study in Europe. He finally completed his medical degree in 1869, but never practiced medicine, having neither need nor inclination to do so. Yet James was far from being a dilettante – rather, he was the opposite; a man diligently seeking his true vocation, and in the process becoming a polymath.

He began to see a way forward, and in 1873 chose to accept a position as an instructor in physiology and anatomy at Harvard. James had become deeply interested in what he called ‘physiological psychology’ – the issue of how creatures of flesh and blood could relate to the spiritual world of their experiences, beliefs and culture. From that point on his intellectual interests began to cohere, and his intellectual horizons continually expanded, resulting in the publication of his masterwork on psychology in 1890. His deep and abiding interest in people –

Person of the Issue William James (1842-1910)

what they did, what prompted their actions, how they reasoned, and how they related to one another – had two major consequences. It meant he shifted emphasis in the emerging discipline of psychology from the theoretical to the practical; and it meant he sought a new form of philosophy that was based on human beings rather than on depersonalized metaphysical abstractions.

TIME LINE

1. 1842. Born in New York City, first child of Henry James and Mary Walsh. James. Educated by tutors and at private schools in New York.
2. 1843. Brother Henry born.
3. 1848. Sister Alice born.
4. 1855–8. Family moves to Europe. William attends school in Geneva, Paris, and Boulogne-sur-Mer; develops interests in painting and science.
5. 1858. Family settles in Newport, Rhode Island, where James studies painting with William Hunt.
6. 1859–60. Family settles in Geneva, where William studies science at Geneva Academy; then returns to Newport when William decides he wishes to resume his study of painting.
7. 1861. William abandons painting and enters Lawrence Scientific School at Harvard.
8. 1864. Enters Harvard School of Medicine.
9. 1865. Joins Amazon expedition of his teacher Louis Agassiz, contracts a mild form of smallpox, recovers and travels up the Amazon, collecting specimens for Agassiz's zoological museum at Harvard.
10. 1866. Returns to medical school. Suffers eye strain, back problems, and suicidal depression in the fall.
11. 1867–8. Travels to Europe for health and education: Dresden, Bad Teplitz, Berlin, Geneva, Paris. Studies physiology at Berlin University, reads philosophy, psychology and physiology (Wundt, Kant, Lessing, Goethe, Schiller, Renan, Renouvier).
12. 1869. Receives M. D. degree, but never practices. Severe depression in the fall.
13. 1870–1. Depression and poor health continue.
14. 1872. Accepts offer from President Eliot of Harvard to teach undergraduate course in comparative physiology.
15. 1873. Accepts an appointment to teach full year of anatomy and physiology, but postpones teaching for a year to travel in Europe.
16. 1874–5. Begins teaching psychology; establishes first American psychology laboratory.
17. 1878. Marries Alice Howe Gibbens. Publishes “Remarks on Spencer's Definition of Mind as Correspondence” in *Journal of Speculative Philosophy*.
18. 1879. Publishes “The Sentiment of Rationality” in *Mind*.
19. 1880. Appointed Assistant Professor of Philosophy at Harvard. Continues to teach psychology.
20. 1882. Travels to Europe. Meets with Ewald Hering, Carl Stumpf, Ernst Mach, Wilhelm Wundt, Joseph Delboeuf, Jean Charcot, George Croom Robertson, Shadworth Hodgson, Leslie Stephen.
21. 1884. Lectures on “The Dilemma of Determinism” and publishes “On Some Omissions of Introspective Psychology” in *Mind*.
22. 1885–92. Teaches psychology and philosophy at Harvard: logic, ethics, English empirical philosophy, psychological research.

Person of the Issue William James (1842-1910)

23. 1890. Publishes *The Principles of Psychology* with Henry Holt of Boston, twelve years after agreeing to write it.
24. 1897. Publishes *The Will to Believe and Other Essays in Popular Philosophy*. Lectures on "Human Immortality" (published in 1898).
25. 1898. Identifies himself as a pragmatist in "Philosophical Conceptions and Practical Results," given at the University of California, Berkeley. Develops heart problems.
26. 1899. Publishes *Talks to Teachers on Psychology: and to Students on Some of Life's Ideals* (including "On a Certain Blindness in Human Beings" and "What Makes Life Worth Living?"). Becomes active member of the Anti-Imperialist League, opposing U. S. policy in Philippines.
27. 1901–2. Delivers Gifford lectures on "The Varieties of Religious Experience" in Edinburgh (published in 1902).
28. 1904–5 Publishes "Does 'Consciousness' Exist?," "A World of Pure Experience," "How Two Minds Can Know the Same Thing," "Is Radical Empiricism Solipsistic?" and "The Place of Affectional Facts in a World of Pure Experience" in *Journal of Philosophy, Psychology and Scientific Methods*. All were reprinted in *Essays in Radical Empiricism* (1912).
29. 1907. Resigns Harvard professorship. Publishes *Pragmatism: A New Name for Some Old Ways of Thinking*, based on lectures given in Boston and at Columbia.
30. 1909. Publishes *A Pluralistic Universe*, based on Hibbert Lectures delivered in England and at Harvard the previous year.
31. 1910. Publishes "A Pluralistic Mystic" in *Hibbert Journal*. Abandons attempt to complete a "system" of philosophy. (His partially completed manuscript published posthumously as *Some Problems of Philosophy*). Dies of heart failure at summer home in Chocorua, New Hampshire.

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Religious Orientation and Psychological Distress among Parents of Mentally Retarded Children

Muzafar Hussain Kawa¹, Humera Shafi²

ABSTRACT:

The present study was an attempt to assess religious orientation and psychological distress as well as to find out relationship of religious orientation with psychological distress among parents of mentally retarded children. Parents of mentally retarded children were also compared on religious orientation and psychological distress with respect to their gender. The data for the present study was obtained from parents of mentally retarded children [N=200 (Fathers 90 & Mothers 110)] belonging to various districts of Kashmir valley. The data collected was analyzed by using appropriate statistical techniques like Pearson's product moment correlation and t-test. The results showed significant negative correlation between intrinsic religious orientation and psychological distress. Moreover, a significant positive correlation was found between extrinsic religious orientation and psychological distress. Significant difference was also found among parents of mentally retarded children on intrinsic religious orientation and psychological distress with respect to their gender. However, no significant difference was found among parents of mentally retarded children on extrinsic religious orientation with respect to their gender.

Keywords: *Mental retardation, Religious Orientation, Psychological Distress*

INTRODUCTION:

Mental Retardation or Intellectual disability (intellectual developmental disorder) is a disorder with onset during the developmental period that includes both intellectual and adaptive functioning deficits in conceptual, social, and practical domains. The following three criteria must be met:

- A. Deficits in intellectual functions, such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience, confirmed by both clinical assessment and individualized, standardized intelligence testing.

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- B. Deficits in adaptive functioning that result in failure to meet developmental and socio-cultural standards for personal independence and social responsibility. Without ongoing support, the adaptive deficits limit functioning in one or more activities of daily life, such as communication, social participation, and independent living, across multiple environments such as home, school, work, and community.
- C. Onset of intellectual and adaptive deficits during the developmental period. (Diagnostic and statistical Manual of mental disorders [DSM-5], 2013).

According to the World Health Organization (WHO), 10% of the world's population has some form of mental disability and 1% suffers from severe incapacitating mental disorders (WHO, 1989). Prevalence of mental retardation is 3% all over the world. However 75% of them fall into mild mental retardation category, while the rest 25% having IQ (Intelligence Quotient) of below 50 are classified as moderately, severely or profoundly retarded (ICD 10). The National Sample Survey Organization report estimates the prevalence of mental disabilities in India to as little as 0.2% (NSSO, 2003).

India is the second most populous country of the world with 1.21 billion populations (census, 2011). The 2011 census in India which has included the disability count as an ingredient in the National Agenda reported that a total of 26,810,557 persons are disabled and the prevalence rate of disability is 2.21 per cent of the general population in India. The total number of mentally retarded persons in India is 1,505,624 and among them 1,85,070 are children (Census, 2011). The prevalence rate of mental retardation in general population in India is 0.124 percent. Among the eight types of disabilities on which data has been collected, disability in mental retardation is 5.6 % (Census, 2011). The total population of disabled persons in J & K state as per census, 2011, is 3, 61, 153. Out of total disabled, 16,724 are mentally retarded. Individuals have been categorized as mentally retarded constitutes 4.63 percent of the disabled in J&K (Census, 2011).

Religious Orientation

Religious orientation differs from religious affiliation, which refers to theological categories of, for example, Catholic, Protestant, Pentecostal, Jewish, Orthodox, Reformed, Conservative, Fundamentalist or Liberal (Levin & Schiller, 1987). The psychology of religion has examined the issue of how individuals approach religion for some time, especially since the work of Allport and Ross (1967) helped to conceptualize two religious orientations: intrinsic and extrinsic. The essential distinction between the two orientations lies in the way individuals approach religion and in what light they view their religiosity. The extrinsic orientation describes a pattern of religious involvement marked by an individual's interest in gaining something from religious participation. Religion thus becomes a tool for the achievement of goals, such as social contact or the improvement of one's financial situation. Further, the values of a faith may be utilized for specific purposes, such as the promotion of an individual's own beliefs or worldview through the strengthened religious justification.

The intrinsic religious orientation is linked to seeing religion as an end in and of itself. Individuals who score high on this religious orientation tend to shape their other life events around their religiosity. These individuals are comfortable with their beliefs and are not motivated to bend their religion to fit or justify their actions; instead, they model their actions on religious doctrines and teachings. In other words, “the extrinsically motivated individual uses his religion and the intrinsically motivated lives his religion,” (Allport & Ross, 1967).

The birth of a disabled child is an event that affects all the family members. It requires a reassessment of the family functioning (Cohen, Friedrich, & Jaworski, 1994; Dyson 1989; Gallimore, Weisner, Kaufman, & Bernheimer, 1989; Heaman, 1995). The majority of families cope with the situation relatively well and are able to continue their life normally (Flynt, Wood, & Scott, 1992; Gibson 1995; Hamlett, Pellegrini, & Katz, 1992). However, coping with a physically or intellectually disabled child is a highly individual process, and there is evidence to suggest that some families may never adjust fully to this event (Gibson, 1995; Koller, Richardson, & Katz, 1992). A number of studies have consistently demonstrated that religious beliefs and practices are related to greater life satisfaction, happiness, positive affect, morale, and other indicators of wellbeing (Koenig, McCullough, & Larson, 2001). In an investigation of the relationship between religious rituals and mental health, it has been found that cross-culturally, religious ceremonies play a significant role in reducing anxiety and isolation as emotions are acknowledged, expressed, and resolved within a social milieu of attachment and connection to significant others (Shumaker, 1992). Religion has also been found to act as a resource for fathers coping with their special needs children, as a father’s experience revolves around his religious beliefs and practices and his relational resources (Olson, Dollahite, & White, 2002).

Psychological Distress

Psychological distress is widely used as an indicator of the mental health of the population in public health and in population surveys. Psychological distress is viewed as an emotional condition that involves negative views of the self, others and the environment and is characterised by unpleasant subjective states such as feeling tense, worried, worthless and irritable (Barlow & Durand, 2005).

The burden of raising a mentally retarded child tends to lead their parents to psychological distress. The demands of caring for children with chronic conditions may precipitate symptoms of depression and general psychological distress (Breslau & Davis, 1986; Jessop, Riessman & Stein, 1988). In addition, both the general psychological literature and specific studies of disabled children show that parental distress and family functioning impacts children in numerous ways, affecting their cognitive, behavioural and social development. Parental psychological distress contributes significantly to behavioural and emotional problems among chronically ill children (Thompson, Gil, Burbach, Keith, & Kinney, 1993).

Recently, the idea of a “religion–health connection” has gained traction among clinicians. Literature reviews and academic and popular books have focused attention on social, behavioural, epidemiologic, and clinical research papers that total in the thousands (Koenig,

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McCullough & Larson, 2001; Levin & Chatters, 1998; Levin, 2001). These studies explore the impact of religious indicators on psychiatric and mental health outcomes in population, community, and hospital samples: rates of mood disorders, such as depression and anxiety; levels of psychological distress, using numerous assessment instruments; dimensions of psychological well-being, such as life satisfaction and happiness; patterns of self-destructive behaviour, including the addictions; and mental health care utilization. The weight of evidence, on average and across studies, suggests that religion, however assessed, is a generally protective factor for mental illness. Medical sociologists, health psychologists, and gerontologists have done a more sophisticated job at identifying impacts of religious life on mental health indicators. Studies of dimensions of psychological distress and well-being, many of them large-scale probability surveys, consistently find a protective effect of religious participation (Levin & Chatters, 1998).

OBJECTIVES

1. To study religious orientation, psychological distress and frustration among the parents of mentally retarded children.
2. To study the relationship between religious orientation and psychological distress among the parents of mentally retarded children.
3. To study the significance of difference of religious orientation and psychological distress on the basis of gender among the parents of mentally retarded children.

HYPOTHESES

Ho₁: There is no significant relationship between intrinsic religious orientation and Psychological distress among the parents of mentally retarded children.

Ho₂: There is no significant relationship between extrinsic religious orientation and Psychological distress among the parents of mentally retarded children.

Ho₃: There is no significant difference in intrinsic religious orientation among the parents of mentally retarded children with respect to their gender.

Ho₄: There is no significant difference in extrinsic religious orientation among the parents of mentally retarded children with respect to their gender.

Ho₅: There is no significant difference in psychological distress among the parents of mentally retarded children with respect to their gender.

METHODOLOGY

Sample

The sample of the present study consisted of 200 parents (90 fathers and 110 mothers) of mentally retarded children. The researcher approached different institutions (Chottay Taray Foundation, Rajbagh, Srinagar; Composite Regional Centre, Bemina, Srinagar and Voluntary Medicare Society, Bemina, Srinagar) working for the welfare of mentally retarded children. These institutions provided the statistics of mentally retarded children admitted in their respective institutions along with address and contact numbers of their parents. Later on the

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researcher used purposive sampling and communicated with the parents of these mentally retarded children and sought the consent from them for participation in the present study.

Tools Used

Religious Orientation Scale (1983)

The Religious orientation was developed by Gorsuch & Vanable, 1983. Otherwise known as Age Universal Scale of Religious Orientation, this scale contains 20 items, 8 of which are meant to characterize a person as intrinsic (5, 6, 7, 9, 11, 12, 16, 19) and rest of the 12 items (1, 2, 3, 4, 8, 10, 13, 14, 15, 17, 18, 20) are meant for measuring the extrinsic orientation. The Age Universal Religious Orientation Scale has internal reliability coefficients of .66 (for the extrinsic scale) and .73 (for the intrinsic scale).

Kessler Psychological Distress Scale (K10) 1996

The Kessler psychological distress scale (K10) (Kessler, 1996) is a widely used, simple self-report measure of psychological distress which can be used to identify those in need of further assessment for anxiety and depression. Kessler and colleagues (2002), found that the Cronbach's alpha for the K10 (a measure of internal consistency reliability) to be high (.93). The brief questionnaire has been shown to have good construct and criterion validity (Kessler et al., 2002), being significantly associated with measures of mental health symptoms and disability as well as the frequency on consultations for a mental health problem in the previous 12 month period.

Procedure for Data Collection

In the present study purposive sampling method was used. The parents were approached personally in their homes after taking the information regarding those parents from the institutions (Chottay Taray Foundation, Rajbagh, Srinagar; Composite Regional Centre, Bemina, Srinagar and Voluntary Medicare Society, Bemina, Srinagar) working for the welfare of these children. Informed consent was taken from parents in order to seek their voluntary participation and only those parents were included who agreed to take part in this study.

Analysis

The information/responses collected from the respondents were subjected to various statistical treatments. The data was analysed by using Statistical Product and Service Solutions (SPSS 16.0). Statistical techniques used for analyzing data were: frequencies, percentages, correlation and t-test.

RESULTS AND DISCUSSION:

Table 1

Showing Frequency and Percentage of Sample Group With Respect to Intrinsic Religious Orientation

Level	Range	<i>f</i>	%
Low	8-12	12	6
Moderate	13-20	111	55.5
High	21-24	77	38.5
Total		200	100

Table 1 reveals that out of 200 parents of mentally retarded children 6% were found low on intrinsic religious orientation, 55.5% show moderate level of intrinsic religious orientation and 38.5% of parents were found high on intrinsic religious orientation. These results have also been presented diagrammatically in Fig. 1 on page no. 8.

Table 2

Showing Frequency and Percentage of Sample Group With Respect to Extrinsic Religious Orientation.

Level	Range	<i>f</i>	%
Low	12-18	5	2.5
Moderate	19-30	140	70
High	31-36	55	27.5
Total		200	100

Table 2 reveals that out of 200 parents of mentally retarded children, 2.5% were found low on extrinsic religious orientation, 70% show moderate level of extrinsic religious orientation and 27.5% of parents were found high on extrinsic religious orientation. These results have also been presented diagrammatically Fig. 2 on page no. 8.

Table 3

Showing Frequency and Percentage of Sample Group With Respect to Psychological Distress.

Level	Range	<i>f</i>	%
Low	10-20	87	43.5
Moderate	21-30	72	36
High	31-50	41	20.5
Total		200	100

Table 3 reveals that out of 200 parents of mentally retarded children, 43.5% of were found low on psychological distress, where as 36% were moderate and 20.5% were high on psychological distress. These results have been presented diagrammatically on page no. 9.

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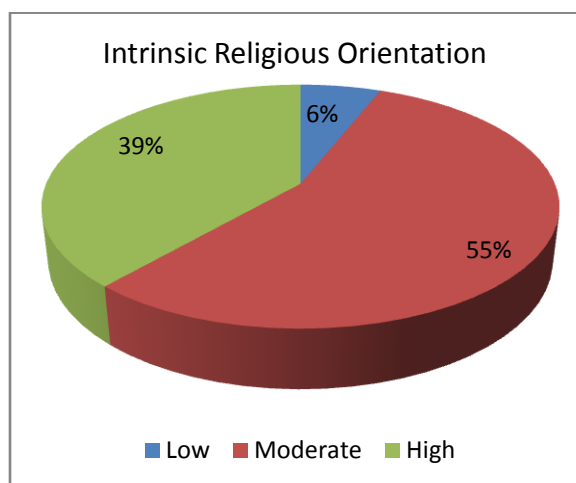


Fig. 1

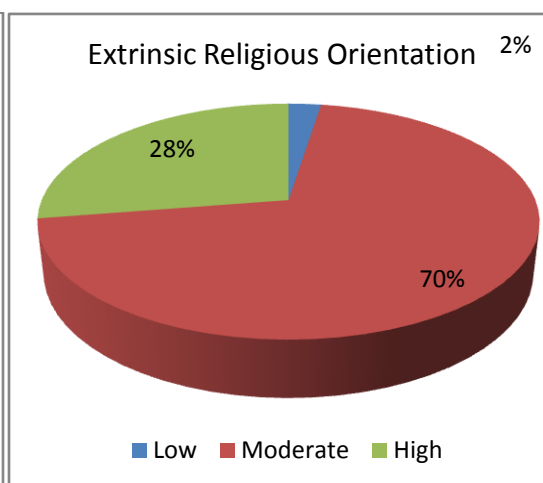


Fig. 2

Figure 1 and 2 shows percentage of sample group in three levels with respect to intrinsic religious orientation and extrinsic religious orientation.

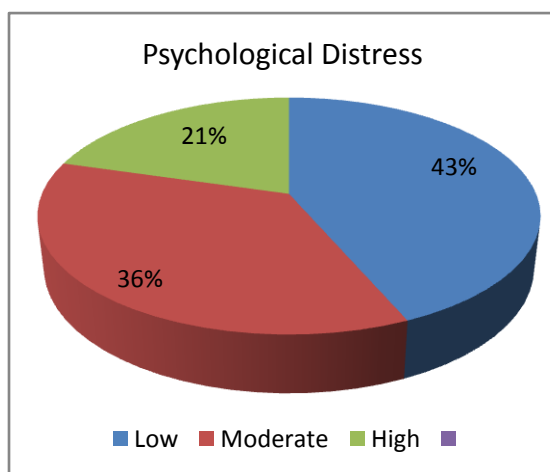


Figure 3 shows percentage of sample group in three levels with respect to psychological distress.

Table 4

Showing Pearson's Correlation Coefficient(*r*) Between Religious Orientation and Psychological Distress of the Sample Group

Variable	<i>r</i>
Intrinsic Religious Orientation	-.643*(<i>p</i> = <0.001)
Psychological Distress	
Extrinsic Religious Orientation	.815*(<i>p</i> = <0.001)
Psychological Distress	

*.*P*≤0.05 Level of significance

Table 4 reveals that there is a significant negative correlation ($r = -.643$, $p < 0.001$) between intrinsic religious orientation and psychological distress among parents of mentally retarded children, indicating "more the intrinsic religious orientation, less is the psychological

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distress and vice-versa.” Thus our null hypothesis H_{01} which states that, “*There is no significant relationship between intrinsic religious orientation and psychological distress among the parents of mentally retarded children*” stands rejected.

The table further reveals that there is a significant positive correlation between extrinsic religious orientation and psychological distress ($r = .815$, $p < 0.001$) among parents of mentally retarded children indicating that “*more the extrinsic religious orientation, more is the psychological distress and less the extrinsic religious orientation, less is the psychological distress.*” Thus, our null hypothesis H_{02} which states that, “*There is no significant relationship between extrinsic religious orientation and psychological distress among the parents of mentally retarded children*” stands rejected.

Table 5

Showing Comparison of Mean Scores of Intrinsic Religious Orientation, Extrinsic Religious Orientation and Psychological Distress among Parents of Mentally Retarded Children With Respect to their Gender

Variable	Gender	<i>n</i>	<i>M</i>	<i>SD</i>	<i>df</i>	<i>t-value</i>
Intrinsic Religious Orientation	Mothers	110	17.20	4.04	198	5.69*
	Fathers	90	20.17	3.18		
Extrinsic Religious Orientation	Mothers	110	27.76	4.35	198	1.20 ^{NS}
	Fathers	90	26.96	4.97		
Psychological Distress	Mothers	110	25.94	6.65	198	10.40*
	Fathers	90	17.22	4.81		
Total N=200						

NS=insignificant, *. $P \leq 0.05$ Level of significance

Table 5 reveals that there is a significant difference in intrinsic religious orientation and psychological distress between mothers and fathers of mentally retarded children ($t = 5.69$, $p = .001$ & $t = 10.40$, $p = 0.001$). The results show that mothers have more psychological distress and fathers are high in intrinsic religious orientation. Thus, our null hypotheses H_{03} , which states that “*There is no significant difference in intrinsic religious orientation among the parents of mentally retarded children with respect to their gender*”; and H_{05} , “*There is no significant difference in psychological distress among the parents of mentally retarded children with respect to their gender*” stands rejected.

The above table further reveals that there no significant difference in extrinsic religious orientation between mothers and fathers of mentally retarded children ($t = 1.20$, $p = .229$). Therefore, the hypothesis H_{04} , which states that “*There is no significant difference in extrinsic*

religious orientation among the parents of mentally retarded children with respect to their gender”, stands accepted.

DISCUSSION

The aim of the present study was to study the religious orientation and psychological distress among the parents of mentally retarded children and relation of religious orientation with psychological distress. The comparison among parents of mentally retarded children on religious orientation and psychological distress with respect to their gender has also been examined.

The results of the present study revealed that there is a significant negative correlation between intrinsic religious orientation and psychological distress among parents of mentally retarded children. There are several studies which are in line with these results. Research studies have shown that intrinsic religious orientation has inverse association with psychological distress, maladjustment, anxiety and depression (Genia, 1996; Hackey, & Sanders, 1996; Ventis, 1995). Moreover, several researchers have found that intrinsic religious orientation serves as a buffer and is negatively correlated to a depressive reaction to negative life events (Hettler, & Cohen, 1998; Kendler, Gardner, & Prescott, 1997; Park, Cohen, & Herb, 1990). An intrinsic orientation to religion is found to share a significant negative association with depressive symptoms (Genia, 1996; Genia & Shaw, 1991; Koenig, 1995). Similarly, Maltby and Day (1999) investigated the relationship between religious orientation and depression and found that depressive symptoms are associated with lower measures of intrinsic religious orientation, optimism, self-esteem and problem-focused coping. Studies conducted by Skinner, Correa, Skinner, & Bailey, (2001) and Biesinger, & Arikawa (2008), revealed that intrinsic religious orientation was associated with greater level of happiness and lower levels of depression, anxiety and stress regardless of gender. Similarly Bergin, Masters, & Richards, (1987) in a study examined the relationship between intrinsic religious orientation and mental health and found that intrinsic religious orientation was negatively correlated with unhealthy attributes, such as anxiety, depression and irrational beliefs.

The results of the present study showed that there is a significant positive correlation between extrinsic religious orientation and psychological distress among parents of mentally retarded children. Research studies have shown that extrinsic religious orientation has clear association with psychological distress; more extrinsic religious oriented individuals, more likely report higher levels of depression and anxiety (Davis, Kerr, & Kurpius, 2003; Park, Cohen, & Herb, 1990). Those higher in extrinsic religious orientation are more likely to share a significant association with depressive symptoms (Baker & Gorsuch, 1982; Bergin, Masters, and Richards, 1987; Genia & Shaw, 1991; Park, Cohen & Herb, 1990). Similarly, Maltby and Day (1999) in a study examined that among men and women, higher scores on the Beck Depression Inventory were accompanied by significantly higher scores on an extrinsic-social and extrinsic personal orientation towards religion, neuroticism, anxiety, internal, global and stable attributions, avoidance and wishful coping measures; and with significantly lower scores on intrinsic orientation towards religion, self-esteem, optimism, problem-focused and support-seeking coping style measures. A study conducted by Biesinger and Arikawa (2002) to investigate

relationship between religious attitude and happiness shows that for both fathers and mothers, being motivated by intrinsic religious beliefs was associated with greater levels of happiness. Fathers who reported having an extrinsic religious orientation were less happy and more distressed. Ghorbani and Watson (2006) in a study examined the relationship of religious orientation with alexithymia, emotional intelligence, self-consciousness, and found that higher levels of an intrinsic religious orientation were associated with higher levels of private self-consciousness and lower levels of depression, anxiety, and perceived stress. On the other hand, higher levels of an extrinsic religious orientation were related to difficulty identifying and describing feelings and with more distress.

There is no significant difference among parents of mentally retarded children on extrinsic religious orientation as far as their gender is concerned. However, significant difference was found among parents of mentally retarded children on intrinsic religious orientation and psychological distress with respect to their gender. Fathers were found high on intrinsic religious orientation as compared to the mothers. The earlier researches on intrinsic religious orientation among parents of mentally retarded children with respect to their gender have mixed results. Several studies are inconsistent with our findings. For example, Cirhinlioglu and Demir (2012) conducted a study to examine religious orientation and its relation to locus of control and depression and found that female participants had higher levels of intrinsic religiosity than male participants. Similarly, Beisinger and Arikawa (2008) in a study examined that there was no significant differences between fathers and mothers on their intrinsic orientation and extrinsic orientation.

As compared to fathers, mothers of mentally retarded children were found high on psychological distress. These findings are in consonance with the findings of Peshawaria, Menon, Ganguly, Roy, Rajan, & Gupta (1998); Hedov, Anneren, and Wikblad 2000; and Seshadri, Verma, and Prashad (2000), indicating that women are more affected in coping with stresses of a child's intellectual disability. Mothers appear to be more vulnerable to psychological distress than fathers, which may be attributed to the fact that mothers are typically more involved with the day-to-day care of their children (Little, 2002; Murphy, Bruno, Abbeduto, Giles, Richmond, & Orsmond, 2004). Similarly Blacher, Lopez, Shapiro, & Fusco (1997) and White & Hastings (2004) in their studies found that in response to heightened stress, mothers of children with mental retardation often demonstrate increased depression compared to mothers of children without mental retardation.

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Mental Health Status of Hostlers and Non-Hostlers in relation to Academic Achievement

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ABSTRACT:

This study was conducted to evaluate the mental health status of Hostlers and Non-Hostlers in relation to their academic achievement.. Sample random sampling method was used in this study to obtain applicable and clear-cut information. The sample of the study includes 160 students selected by sample random sampling from the Aligarh Muslim university .The mental health was measured by means of the Mental Health inventory (MHI), developed by jadish and srivastav, 1995. The participants 'previous two years academic achievement scores were used for assessing their academic achievement. The first finding of the study showed that academic achievement appeared as a significant predictor of mental health among hostlers .It means that there is a significant positive correlation ' $R' = .931$ between academic achievement and mental health among hostlers ,The second finding also showed that academic achievement appeared as a significant predictor of mental health among non- hostlers, It means that there is a significant positive correlation ' $R' = .491$ between academic achievement and mental health among non-hostlers. The results also reveal that hostlers showed significantly better academic achievement and mental health when compared with non- hostlers. For the analysis of the obtained data, simple linear regression analysis and t-test was used.

Keywords: *Mental Health, Academic Achievement, Hostlers and Non-Hostlers.*

INTRODUCTION:

Mental health is defined as a state of Well-being in which each individual realizes his or her potential, can deal with the usual stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. It is the capability to feel, think and act in ways that enhance one's ability to enjoy life and contract with challenges. Expressed in a different way, mental health refers to various capacities including the ability to: understand oneself and one's life; relate to other people and respond to one's environment, experience pleasure and enjoyment; handle stress and withstand discomfort; evaluate challenges and problems; pursue goals and interests; and explore choices and make decisions.

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Mental health is an integral part of our well-being, yet mental health issues have been unhappily neglected in India. Even worse is the fact that serious mental illnesses are not treated early and the treatment gap even for such disorders is very large. It is well known that people in disadvantaged situations have high levels of mental morbidity and poor access to treatment. Prisons and other custodial institutions are locations which see high levels of mental distress and morbidity. Mental distress may occur in otherwise normal individuals in response to the stress of imprisonment. They may occur in helpless individuals who have pre-existing illness that gets exacerbated in prisons, or develops a new in prisons as a result of stress or other factors. Persons with certain types of personality disorders are also more probable to enter prisons. Given that many of these vulnerabilities are allied with the use of both licit and illicit drugs, it would be expected that these pre-dispositions would also enter the prison along with the prisoner. This adds to the already high burden of substance use (tobacco, alcohol etc.) encountered in prison.

Academic Achievement

Academic achievement may be defined as brilliance in all academic disciplines, in class as well as co- curricular activities. It includes excellence in sporting behavior, confidence, communication skills, punctuality, arts, culture and the like which can be achieved only when an individual is well adjusted. Trow (1956) defined academic achievement as “knowledge attaining ability or degree of competence in school tasks usually measured by standardized tests and expressed in a grade or units based on pupils’ performance”. Good (1959) refers to academic achievement as, “The knowledge obtained or skills developed in the school subjects usually designed by test scores or marks assigned by the teacher”. Mehta K.K. (1969) defined academic achievement as “academic performance includes both curricular and co-curricular performance of the students. It indicates the learning outcome of the students. In class rooms students performs their potentials proficiently as a result of it, learning takes place”. The learning outcome changes the behavior pattern of the student through different subjects

Academic achievement is the utmost performance in the entire activities at school after a period of training. Steinberg and Merriam (1993) “Achievement encompasses student ability and performance; it is multidimensional; it is intricately related to human growth and cognitive, emotional, social, and physical development; it reflects the whole child; it is not related to a single instance, but occurs across time and levels, through a student’s life in public school and on into post secondary years and working life.”. Webster defines achievement as "the quality and quantity of a student's work.”.

OBJECTIVES:

- 1) To ascertain the influence of academic achievement on mental health among Hostlers.
- 2) To find out the Influence of academic achievement on mental health among Non-Hostlers
- 3) To see the difference between hostlers and non hostlers in terms of their Academic Achievement.

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- 4) To find out the difference between hostlers and non hostlers in terms of their mental health.

On the basis of the above mentioned objectives the following research questions were formulated:

- 1) Is there any influence of academic achievement on mental health among hostlers?
- 2) Is there any influence of academic achievement on mental health among non hostlers?
- 3) Is there any difference between hostlers and non hostlers on the basis of their academic achievement?
- 4) Is there any difference between hostlers and non hostlers on the basis of their mental health?

Model Summary				
Model	R	R Square	Adjusted R Square	Change Statistics
1	.931 ^a	.867	.865	.867
a. Predictors: (Constant), Academic Achievement Hostlers				

The above table shows Simple Linear Regression analysis of Academic achievement, it showed that Academic achievement appeared as significant predictor of mental health. It was found that Academic achievement (Predictor) emerged to influence significantly the hostlers' Mental health (Criterion). This table shows the model summary, which indicates one predictor of the model. The correlation was found to be $R = .931$. R Square change mentioned in the above table indicates the actual contribution of predictor variable to the criterion variable. Therefore the original covariance, the magnitude of independent variable which contributed to the dependent variable (Mental health) came out as 86.7%.

Coefficients ^a					
Model		Unstandardized Coefficients		Standardized Coefficients	Sig.
		B	Std. Error	Beta	
1	(Constant)	-267.171	21.325		.000
	Academic Achievement Hostlers	1.559	.069	.931	.000
a. Dependent Variable: Overall Mental Health Hostlers					

The above table clearly shows that Academic achievement, the predictor variable influences mental health (Criterion). The Statistical value given in the table was found significant for above mentioned predictor that is Academic achievement indicating a relationship between predictor and criterion variable mental health. The value of Partial Correlation is $r = .931$, therefore predictor significantly influenced the degree of Mental health; this finding indicates that Academic achievement appeared as a significant factor of Mental health among Hostlers. The table indicates a significant positive correlation exists between Academic achievement and

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mental health among Hostlers. It means that when Academic achievement increases mental health also increases and when Academic achievement decreases Mental health also decreases.

Model Summary				
Model	R	R Square	Adjusted R Square	Change Statistics R Square Change
1	.491 ^a	.241	.231	.241
a. Predictors: (Constant), Academic Achievement Non-Hostlers				

The above table shows Simple Linear Regression analysis of Academic achievement, it showed that Academic achievement appeared as significant predictor of mental health. It was found that Academic achievement (Predictor) emerged to influence significantly the non-hostlers' Mental health (Criterion). This table shows the model summary, which indicates one predictor of the model. The correlation was found to be $R = .491$ R Square change mentioned in the above table indicates the actual contribution of predictor variable to the criterion variable. Therefore the original covariance, the magnitude of independent variable which contributed to the dependent variable (Mental health) came out as 24.1%.

Coefficients ^a					
Model		Unstandardized Coefficients		Standardized Coefficients	Sig.
		B	Std. Error	Beta	
1	(Constant)	114.714	17.360		.000
	Academic Achievement Non-Hostlers	.261	.052	.491	.000

The above table clearly shows that Academic achievement, the predictor variable influences mental health (Criterion). The Statistical value given in the table was found significant for above mentioned predictor that is Academic achievement indicating a relationship between predictor and criterion variable mental health. The value of Partial Correlation is $r = .491$, therefore predictor significantly influenced the degree of Mental health; this finding indicates that Academic achievement appeared as a significant factor of Mental health among non-hostlers. The table indicates a significant positive correlation exists between Academic achievement and mental health among non-hostlers. It means that when Academic achievement increases mental health also increases and when Academic achievement decreases Mental health also decreases.

The table indicates the Mean, SD, SE_D and t value of hostlers and non-hostlers in terms academic achievement and mental health.

Groups	N	Mean	SD	SE_D	t-value
Academic Achievement Hostlers	80	331.00	15.394	2.10	10.66**
Academic Achievement Non-Hostlers	80	308.60	10.813		
Mental Health Hostlers	80	213.80	16.096	2.01	6.36**
Mental Health Non-Hostlers	80	201.00	8.1750		

This table shows the mean difference between hostlers and non-hostlers in terms academic achievement and mental health. It is clearly shown that hostlers show better academic achievement (Mean= 331) as compared to non-hostlers (Mean = 308.60). The t-value was found to be 10.66** which is significant at 0.01 and 0.05 levels. The table also reveals that hostlers are having better mental health (Mean= 213.80) as compared to non-hostlers (Mean= 201). The t-value was found to be 6.36** which is significant at 0.01 and 0.05 levels.

CONCLUSION

The paper analyses mental health status of hostlers and non hostlers in relation to their academic achievement. The result findings reveal that hostlers have better mental health as compared to non-hostlers and academic achievement of hostlers is high as compared to non-hostlers. It is because hostlers are living in competitive, informative and educative environments and enjoy better facilities in hostels which lead to their higher academic achievements and to success in life. As the present world is plagued by the problems like oppression, exploitation, social and political crisis, trauma etc, so it is necessary to succeed in the present world and hostels play important roles in achieving success of individuals.

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A study of Emotional Intelligence and Adjustment among School Students

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ABSTRACT:

Aim of the research is to find out the Emotional Intelligence and Adjustment among School Students so investigator selected three groups one is type of faculty second is type of area and third is sex. In the present research, the researcher 240 units by sample random technique. In each group, 30 students were selected. Scale was use for data collection is personal datasheet; **Emotional Intelligence Scale** developed by Dr. P.P.Patel and Dr. H.P.Patel was used The Reliability coefficient 0.89 and split-half method, Reliability coefficient 0.85 and The “**Adjustment Inventory**” by M.M.Bell. The reliability score of adjustment inventory comes to 0.85. 2x2x2 factorial design was used and data were analysis by ‘F’ test.

Keywords: *Emotional Intelligence, Adjustment, School Students*

INTRODUCTION:

Emotional Intelligence was hypothesized to be a factor in successful life adjustment, among them the successful achievement of a well-balanced life with little interference between work, family and leisure.

Man is unique and excellent creation of nature. Nature has intelligence, thinking & feelings to mankind. If the intimate relation between nature and man is maintained, most of today's problems become light but unfortunately, today's man is constantly going away from the nature. The reason being the constantly increasing needs and conflicting

Attempts to fulfill these needs.

Every man in present competitive age is involved in the ambition to get more and more than others. The most important matter is the striking desire to make adjustment with environment. The perfect adjustment with the environment is the indicator the height of happiness. To make the life meaningful, the individual has to make constant attempts to make adjustment in every field of life. In making continuous attempts to adjust in the constantly changing environment, the individual has change his self or after his environment. Psychologists have long tried to understanding the relationship of emotional intelligence to school students.

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Students live in confusing times. On the one hand, Teachers are being exhorted to deliver a tightly prescribed. The ability to understand ourselves and other people, and in particular to be aware of understand and use information about the emotional states of ourselves and other with competence. It includes the ability to understand, express, and manage our own emotions, and respond to the emotions of others, in ways that are helpful to us and others. In Aristotle's view, anyone can become angry—that is easy. But to be angry with the right person, to the right degree at right place, for the right purpose, and in the right way – that is not easy. The upsurge of interest in Emotional Intelligence is a welcome corrective to the school curriculum which has been too focused, traditionally, on the desiccated certainties of text-book academia and, latterly, on 'competencies' driven, in part, by narrow technical and economic imperatives. Developing skills and pleasure in the rich world of the emotions is vital to the well-being of both individuals and their communities. Emotionally stupid people can do genuinely stupid (cruel, destructive) things. American colleges and universities have taken on the responsibility of assisting students with their adjustment to college in multiple ways. Many standard services contribute to the positive adjustment of students, including academic support programs, counseling services, academic and career advising, living-learning centers, residence halls, campus activities, and health and wellness programs. In addition, there are also services specifically designed to aid in adjustment to college, including new student orientation programs, University 101 courses, freshman interest groups and learning communities, developmental/remedial courses, and early warning systems. There has been a continuous struggle between the needs of the individual and the external forces since time immemorial. According to Darwin's (1859) theory of evolution, those species which adapted successfully to the demands of living, survived and multiplied while others who did not, died out. Therefore, the adaption or changing of oneself or one's surroundings according to the demands of the external environment became the basic need for our survival. It is as true today with all of us it was with the Darwin's primitive species. Those of us who can adapt or adjust to the needs of changing conditions can live happily and successfully, while others either vanishes lead miserable lives or prove a nuisance to society.

Adjustment is the main part of human life. Living is a process of adjustment and it is a process of unique importance in human life. It is a satisfactory and harmonious relationship of an organism to its environment. Thus, the term adjustment may be defined as, "The process of finding and adopting modes of behaviour, that is suitable to the environment of to the changes in the environment." You as teachers are more concerned with this topic because the primary purpose of education is to train children to solve life's personal, social, and economic problems. If you examine the various activities of an individual's life, you will find that most of them involve adjustment of the individual to his vocational, social and economic problems. "The process of adjustment starts from the birth of the child and continues till his death." The concept of adjustment is as old as human race on earth. Systematic emergence of this concept starts from Darwin (1859). In those days, the concept was purely biological and he used the term adaptation. The adaptability to environment hazards goes on increasing as we proceed on the phylogenetic scale from the lower extreme of life. Insects and germs, in comparison to human beings, cannot withstand the hazards of changing conditions in the environment and as the season changes, they

die. Hundreds of species of insects and germs perish as soon as winter begins. Man, among the living beings, has the highest capacities to adapt to near situation. Man as a social animal not only adapts to physical demands but he also adjusts to social pressures in the society. Biologists used the term adaptation strictly for physical demands of the environment but psychologists use the term adjustment for varying conditions of social or interpersonal relations in the society. We see that adjustment means reaction to the demands and pressures of social environment imposed upon the individual. The demands may be external or internal to which the individual has to react. Observe the life of a child, he is asked to do this and not to do other things. He has to follow certain beliefs and set of values which the family follows. His personality develops in the continuous process of interaction with his family environment. There is other demand which may be termed as internal as hunger, water, oxygen and sleep etc. If we do not fulfil these internal demands, we feel uncomfortable with the development of the child; these physiological demands go on increasing and become more complex. Adjustment has several meanings; many relate to insurance, contracts or the resolution of disputes. In engineering, mathematics and geodesy, the optimal parameter estimation of a mathematical model so as to best fit the data set. The most important method is the least squares adjustment, found by Carl Friedrich Gauss. In metrology, the set of operations carried out on an instrument in order that it provides given indications corresponding to given values of the measured. In statistics it is the compounding for confounding variables.

OBJECTIVE OF STUDY:

1. To examine effect of emotional intelligence and adjustment among school students.
2. To study the effect of emotional intelligence and adjustment among type of area among school students.
3. To study the effect of emotional intelligence and adjustment with type of stream among school students.
4. To study the relationship between emotional intelligence and adjustment among type of sex among school students.
5. To examine effect of emotional intelligence and adjustment with reference to type of area and stream among school students.

HYPOTHESIS:

1. There are no significant effects between the mean of the scores on emotional intelligence of urban and rural school students.
2. There are no significant effects between the mean of the scores on stream of emotional intelligence of among urban and rural school students.
3. There are no significant effects between the mean of the scores on sex of emotional intelligence of among urban and rural school students.
4. There will be no significant interactive effects between the mean of the scores on stream of emotional intelligence of among urban and rural school students.

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5. There will be no significant interactive effects between the mean of the scores on types of area and sex of emotional intelligence of among urban and rural school students.

6. There will be no significant interactive effects between the mean of the scores on types of stream and sex of emotional intelligence of among urban and rural school students.

METHOD:

Sample:

In a real social life, when we have to conduct any research, it is not possible to contact all the members of that field. Researcher cannot collect data from all the members of particular field of research. We cannot reach everybody to collect data by using questionnaire. To remove these difficulties, researcher selects some of the members; researcher selects some of the members representing the population. The data is collected from the sample and the generalization is made about the population. In our daily life, the technique of sampling is used. We purchase food grains such as wheat, rice etc. by examining the sample. In purchasing many other things, the technique of examining sample is used. Doctor diagnosis malaria or some other diseases on the basis of examination of sample of blood. We have many factories by selecting a sample. Research is conducted on the subjects of sample and so the time, ability and finance are saved. We can do the research work rapidly and make necessary generalizations. Sample provides an estimate about the research.

Procedure:

In the present research, the researcher 300 units by sample random technique. Finally, 240 subjects were selected for this study, subtracting the subjects with incomplete information. In it 120 sciences students and 120 Arts students are selected. In every group, 60 were selected from urban area and 60 from rural area. In this group of 60 from urban area and 60 from rural from rural area, thirty are male and thirty are female. The table of sample selection is given as under.

Tools:

(a) Emotional Intelligence scale

Emotional Intelligence scale was constructed and standardized by Dr. P.P.Patel and Dr. H.P.Patel

Reliability: The reliability of the emotional intelligence scale was found by test-retest method, Reliability coefficient 0.89 and split-half method, Reliability coefficient 0.85.

Validity: The item and the test as a whole appear to be plausible and relevant to the student's life situation. Furthermore, the items in the scale have hundred percent against educational and psychological express regarding their suitability to measure students emotional intelligence. Therefore test possess high face validity. In addition to this attempts have also been made to establish construct validity. No. of items: This scale consists of 77 true false type items.

Prescription of this scale

- (a) Self awareness
- (b) Self management
- (c) Social consciousness
- (d) Social skill

(b) Adjustment Inventory

Adjustment Inventory was constructed and standardize by M.M.Bell.

Reliability: The reliability score of adjustment inventory comes to 0.85, derived by the split half method, obtained from the sample of 320 students.

Validity: Adjustment inventory has been found to possess content validity as measured with the help of views expressed by judges. Because of the lack of appropriate external criteria, related validity could not be established.

No. of Items: This inventory consists of 128 items.

Description of this scale

- (a) Family adjustment
- (b) Health adjustment
- (c) Social adjustment
- (d) Emotional adjustment

RESULTS:

Analysis of variance on Emotional Intelligence for 2x2x2 factorial design

n=30 N =240

Source	Sum of Squares	Df	Mean SS	F-Value	Level of Significance
A (Type of Area)	1983.750	1	1983.750	4.078	0.045
B(Stream)	3465.600	1	3465.600	7.124	0.008
C(Sex)	1870.417	1	1870.417	3.845	0.051
AxB	1.667	1	1.667	0.000	0.995
AxC	385.067	1	385.067	0.792	0.375
BxC	84.017	1	84.017	0.173	0.678
AxBxC	1972.267	1	1972.267	4.054	0.045
SSW	112868.467	232	486.502		
Total	16296748.000	240			

Type of Area (A= A₁ and A₂) Vs emotional Intelligence:

The type of area plays decisive role on Emotional Intelligence. So in order to know whether there is a relationship between the types of area and emotional intelligence, the following questions were posed:

What happened to the scores on emotional intelligence of science stream and arts stream students when the type of area is taken into consideration as an independent variable?

The following null –hypothesis was formulated to answer the above question and checked with F test:

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H₀₁ There will be no significance effects between the mean of scores on emotional intelligence of urban and rural school students.

It is observed that the type of area plays a very crucial role in connection with emotional intelligence. There are number of schools in both urban and rural area, which provides good infrastructure, better education, good facilities and so many things. Hence, the student studying either of any type of area may have more or less emotional intelligence. Urban students may have more exposure about the modern world and techniques in comparison to rural students. It was checked with the help of F-test. With a glance to table 4.1.3, we may come to know that the mean score for the type of area is 1983.750 and F value for the same is 4.078, which is significant at 0.05 significance level. It means that there is significance difference between the urban and rural students for their emotional intelligence. Shows that mean score for urban students on emotional intelligence is $M = 256.7250$ ($N = 120$) and rural students emotional intelligence is $M = 262.4750$ ($N = 120$) and the mean difference for the both group is 5.75 which shows that one group is better than the other group.

So the above **H₀₁**, null hypothesis is rejected and we may say those urban and rural students differ from the point of view of emotional intelligence.

Stream ($B = B_1$ and B_2) Emotional intelligence

Stream also plays an important role on emotional intelligence. So to check the relationship between intelligence and stream the following hypothesis is formed and checked.

H₀₂ There will be no significance effects between the mean of scores on stream of emotional intelligence among urban and rural school students.

It is observed that the type of area plays a very crucial role in connection with emotional intelligence. There are number of schools in both urban and rural area, which provides good infrastructure, better education, good facilities and so many things. Hence, the student studying either of any type of area may have more or less emotional intelligence. Urban students may have more exposure about the modern world and techniques in comparison to rural students. It was checked with the help of F-test. With a glance to table 4.1.3, we may come to know that the mean score for the type of stream is 3465.600 and F value for the same is 7.124, which is significant at 0.05 significance level. It means that there is significance difference between the science and arts students among the urban and rural students for their emotional intelligence. shows that mean score for science urban students on emotional intelligence is $M = 263.4$ ($N = 120$) and rural students emotional intelligence is $M = 255.8$ ($N = 120$) and the mean difference for the both group is 7.6 which shows that one group is better than the other group.

So the above **H₀₂**, null hypothesis is rejected and we may say that emotional intelligence for streams among urban and rural students differs.

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Mean score of Adjustment 2x2x2 Vs variables

(Type of Area, Stream and Sex)

	B₁		B₂	
	C₁	C₂	C₁	C₂
A₁	M 67.0333	67.8065	65.5	61.6
	N 30	30	30	30
A₂	M 67.4333	79.5862	79.2	81.2
	N 30	29	30	30

The mean Adjustment scores of Type of Area, Stream and Sex as seen from the shows the mean of Area i.e. urban in A₁ and Rural in A₂, mean of stream i.e. Science in B₁ and Arts in B₂, mean of Sex i.e. male in C₁ and Female in C₂. The mean score for urban male science students is 67.033 and urban female science student is 67.085. So the difference is very small. Females are having little bit more mean score it means that they get adjustment rapidly in comparison to male. As well as arts students shown in B₂. The mean score for Urban Arts male students is 65.5 and Urban Arts female student is 61.6. Here male students get more adjustment in comparison to female arts students.

The mean score for rural science male students is 67.43 and for rural science, female students are 79.59. Here we find significance difference between these two. Here female students show more adjustment in comparison to male students. The mean score for rural arts male students is 79.2 and for rural arts female students is 81.2. Here we find significance difference between these two. Here also female students show more adjustment in comparison to male students.

CONCLUSION:

- It was seen that male urban and rural school students significantly differ on Emotional Intelligence score as compared to female urban and rural school students. It means there is a high Emotional Intelligence of male urban and rural school students.
- It is observed that there is a significant interaction between stream and sex of Emotional Intelligence of Science and Arts school students.
- It was seen that there is more adjustment of urban students from rural students.
- It is observed that male urban and rural school students significantly differ on Emotional Intelligence score as compared to female urban and rural students. It means there is more adjustment of female urban and rural school students (Area of urban and rural).
- Hence, it is seen that there is a significant interaction between types of area and stream of adjustment of urban and rural school students. It means both school results are closure in the level of adjustment.

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- It is seen that there is a significant interaction between stream and sex of adjustment of urban and rural school students. It means both school results are closure in the level of school adjustment.

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Mental Retardation an Overview

Dr. Thiyam Kiran Singh¹, Arya Arvind²

ABSTRACT:

There are limited numbers of studies which have evaluated mental retardation in a complete way. This article reviews the existing literature and electronic searches available regarding mental retardation. This article deals with mental retardation, definitions, types, brain defects causing retardation, some organic syndromes associated with retardation, screening tools used and a brief view on treatment methods used by Psychologist.

Keywords: *Mental Retardation, Treatment, Screening Tools, Overview*

INTRODUCTION:

The earliest reference to intellectual disability dates to the Egyptian Papyrus of Thebes in 1552 B.C. In 18th century people with no adequate social skills and mild intellectual disability received little or no special attention and those with severe intellectual disability was cared in monasteries. In late 18th century Jean-Marc Itard was credited with creating the first systematic intervention program for a People with Intellectual Disability in France First residential facility for intellectually disabled was founded in mid 19th century in Switzerland. Initial attempts to develop classifications for mental illness in the late 19th century were based on etiological and physical correlates of observable traits, followed by differentiation based on level and severity of cognitive impairment. The term 'mental retardation' was used by the American Association of Mental Retardation (AAMR) for the first time in 1961. Psychological tests to assess intelligence were developed in the 20th century

The AAMD (1983) states that “Mental retardation refers to a significantly sub-average general intellectual functioning resulting in or associated with concurrent impairments in adaptive behavior and manifested during the developmental period”. It is a more functional definition which stresses the interaction between the person’s capabilities, the environment in which the individual functions and the need for support systems. The AAMR (1992) defined mental retardation as manifesting before age 18, refers to a substantial limitations in present functioning, characterized by significantly sub-average intellectual functioning which exists concurrently with related limitations in two or more of the following adaptive skill areas: communication, -

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Mental Retardation an Overview

- self-care, home living, social skills, community use, self-direction, health and safety, functional academics, leisure and work. American Psychiatric Association(2000) states that mental retardation is significantly sub average general intellectual functioning that is accompanied by significant limitations in adaptive functioning in certain skill areas such as self-care, work, health and safety.

Adaptive functioning can be defined as mastering childhood skills like toileting, dressing, understanding concept of time and money, able to use tools, to shop, to travel alone in public transport and become socially responsive. For example an adolescent is expected to be able to apply academic skills, reasoning and judgment to daily living and participation in group activities. An adult is expected to be self-supporting and assume social responsibilities. There are many tests to measure adaptive behavior. Adaptive Behavior Scale (Nihiria et al 1975) and Vinland Adaptive Behavior Scale (Sparrow, Ballo & Cicchetti, 1984) are two among them.

General intelligence is defined as capacity of individual to perceive, think, understand object outside him and react without confusion and perform activities successfully and adjust himself in social situation without conflict

AMERICAN ASSOCIATION ON INTELLECTUAL & DEVELOPMENTAL DISABILITY

American Association on Intellectual & Developmental Disability is functioning since 1876. Mission of this organization is to promote positive policies, sound research, effective practices and universal human right for people with intellectual disability. In 2006 changed name to American Association of Mental Retardation. In 10th edition of AAIDD (2002) a new definition was given to Mental retardation i.e. Mental retardation can be defined as disability characterized by significant limitation in both intellectual functioning and adaptive behavior as expressed in conceptual, social and practice adaptive skills

❑ 5 Assumptions essential for application of definition

- * Limitations present in functional must be considered with in context of communicative environment typical of individuals age, peers and culture
- * Valid assessment consider cultural and language diversity as well as difference in community, sensory motor and behavioral factor
- * Within an individual limitations co-exist with strength
- * An important purpose of describing limitations to develop profile need support
- * With appropriate personalized support over sustained period, life functioning of person with mental retardation improve

Types of Mental Retardation:

1. *Mild Mental Retardation*

75% to 90% of all cases of retardation constitute mild mental retardation. They are educable. Function at one half to two thirds of CA (IQ range 50-69). They may have no unusual physical signs and can acquire practical skills. Acquire language for delay but able to use speech for every day purposes. Difficulty in academic school work, reading and writing are present. Mild Mentally Retarded people are Integrated into general society. Intellectual level of mild mentally retarded as adult is comparable to those of average 8 to 11 year old children

In preschool children there will be no obvious conceptual differences for school going children there will be difficulties in learning and too meet age related expectations. In adults short term memory, abstract thinking, executive function are impaired. They are immature in social interactions and in controlling emotions. These type of children need support

2. *Moderate Mental Retardation*

7% of all cases of retardation constitute moderate mental retardation. They are trainable. Function at one third to one half of CA (IQ: 35 to 49). They have noticeable delays, especially in speech. May have some unusual physical signs (clumsy, ungainly, deformities and poor motor coordination). They Can learn simple communication, elementary health and safety habits, can participate in simple activities and self-care, perform tasks in sheltered conditions and Can travel alone to familiar places. They can attain intellectual level similar to those of average 4 to 7 year old children. They have lagged conceptual skills. Need assistance in day to day tasks. Significant social and communication skills are lagged. By teaching and training individual can be independent in fulfilling personal needs.

3. *Severe Mental Retardation*

3% of all cases of Mental retardation constitute of severe mental retardation. Function at one fifth to one third of CA (IQ: 20 to 34). They are Dependent retarded. Have Marked and obvious delays; may walk late. Little or no communication skills but may have some understanding of speech and show some response. Their speech and communication is focused on here and now with in everyday events. They can be taught daily routines and repetitive activities can be trained in simple self-care. Such kind of children need direction and supervision. They can develop limited levels of personal hygiene and self help skills. Attainment of concepts in severely mentally retarded will be limited.

4. *Profound Mental Retardation*

1% of all cases of mental retardation constitute profound mental retardation. They function less than one fifth of CA (IQ: < 20). They have marked delays in all areas. Congenital abnormalities often present. Often need attendant care. So they are called Life support retarded or custodial. They respond to regular physical activity and social stimulation and not capable of self-care. Conceptual skills generally involve physical world than symbolic process. Individuals use objects in goal directed manner. Motor and sensory impairments may prevent functional use of objects. Individuals have very limited understanding of speech and gesture. Individuals will enjoy interaction with family members and care takers.

Brain Defects in Mental Retardation

Some cases of mental retardation occur in association with known organic brain pathology (Kaski, 2000). Profound retardation, which fortunately is rare, always includes obvious organic impairment. Genetic Chromosomal Factors, Infections and toxic agents, Trauma (physical injury) Ionizing radiation are some factors which cause mental retardation.

Genetic Chromosomal Factors:

Genetic chromosomal factors play a major role in severe mental retardation, down's syndrome, fragile x. Genetic aberrations are responsible for metabolic alterations that adversely affect the brain development involve many other developmental anomalies besides mental retardation- for eg:- autism. Mental retardation associated with known genetic chromosomal defects is moderate to severe

Infections and Toxic Agents:

Mental retardation can also be associated with wide range of conditions due to infection such as viral encephalitis, or genital herpes (Kaski, 2000). If a pregnant lady is infected with syphilis or HIV-1 or if she gets German measles, her child may suffer brain damage. We are in developing world where pollution and electronic goods rule our world. Increased level of Carbon Monoxide can lead to brain damage and thus cause mental retardation. If pregnant lady took drugs or alcohol then child have more chances to be mentally retarded.

Ionizing Radiation:

Powerful radiation can damage sex cells, other body cells and tissues. Each and every country in this world is trying to be number one in Nuclear weapons. So they are conducting tests to improve their weapons but these kind of testing are harmful for human beings. We have a perfect example of Nagasaki and Hiroshima. Then Leakages at nuclear power stations like what happened in Bhopal. In a race to rule the world we are destroying dreams of thousands of unborn babies.

Trauma (Physical Injury)

Physical injury at birth can result in mental retardation (Kaski, 2000). Malposition of fetus and bleeding within the brain can also cause mental retardation. Hypoxia i.e. lack of sufficient oxygen in brain can also result in mental retardation.

Malnutrition

Dietary deficiencies in protein and other essential nutrients in early development of fetus could do irreversible physical and mental damage. Malnutrition can affect child's responsiveness, curiosity and motivation to learn (Ricciuti, 1993).

Organic Retardation Syndromes

Mental retardation stemming from biological causes can be classified into several recognizable clinical types. Down Syndrome, Phenylketonuria, Cranial Anomalies are also associated with mental retardation.

A) DOWNS SYNDROME

Downs syndrome was first described by Langdon Down (1866). It is associated with severe and moderate mental retardation. 1 in every 1000 babies is diagnosed as having Down's syndrome. This creates irreversible limitations on survivability, intellectual achievement and competence in managing life tasks. Adaptive abilities will decrease with increasing age, especially after 40. Flat facial profile, almond shaped eyes, abnormally thick eyelids, face and nose are often flat and broad, large mouth, Iris of eye is frequently specked, small ears, curving fifth fingers, single transverse palmar creases are the characteristics of Down's syndrome. Children also have slow growth, congenital heart defect, thyroid dysfunction, developmental delay, especially in speech. Trisomy in 21st chromosome or late conception can be a reason for Down's syndrome.

C) CRANIAL ANOMALITIES

Mental retardation is associated with number of conditions that involve alterations in head size and shape and for which the causal factors have not been definitely established.

- i) **Macrocephaly:** Large headedness, Increase in size and weight of brain, Enlargement of skull, Visual impairment, Convulsions
- ii) **Microcephaly:** Small headedness, Cranium fails to attain normal size, Head circumference will be less than 17 inches and normal size is 22 inches, Penrose (1963) described that microcephaly children have normal musculature and sex organs, Skull will be cone shaped, they have receding chin and forehead
- iii) **Hydrocephaly:** Abnormal amount of CSF within cranium causes damage to brain tissues and enlargement of skull. Head can be enlarged at birth or begins to enlarge soon after as a result of absorption or circulation of CSF. Can arise in

Mental Retardation an Overview

infancy/early childhood following development of tumor, subdural hematoma, meningitis. This results in convulsions, Impairment or loss of sight/hearing

MENTAL RETARDATION IN INDIA

In pre-colonial India Mughal rulers exemplified as protectors, established charity homes for persons with disabilities and provided care and protection for needy. After Mughal rule colonial rule changed those patterns by shifting these people to asylums from community inclusive settings. It was at the Madras Lunatic Asylum, renamed the Institute of Mental Health, that persons with mental illness and those with mental retardation were segregated and given appropriate treatment. Special schools were started for those who could not meet the demands of the mainstream schools. The first residential home for persons with mental retardation was established in Mumbai, then Bombay. Followed by the establishment of a special school in 1944. Subsequently, 11 more schools were established in other parts of India. In 1950 there were only 10 special schools and now there are more than 3000 special schools in our country. From this we could understand that people have understood the value of special school education. The Indian Education Commission, 1964-66 made a clear mention of the presence of only 27 schools for persons with mental retardation in the entire country at that time. In 1953, training teachers to teach persons with mental retardation was initiated in Mumbai by Mrs. Vakil. In 1971, special education to train persons with mental retardation was introduced in Chennai at the BalaVihar Training School by Mrs. M. ClubwalaJadhav. In the same year, the Dilkush Special School was established in Mumbai initiating special teachers' training programs

INDIAN SCREENING TOOLS

- i) Developmental Screening Test (DST) by Bharat Raj is a widely used screening tool by professionals.
- ii) Upanayan Early Intervention Programming System (1987).
- iii) Functional Assessment Check List for Programming (FACP) 1991.
- iv) The revised Madras Developmental Programme System Behavioural Scale MDPS-A curriculum based assessment checklist (1975) is suitable for identification purposes

POLICIES AND PROGRAMMES

- ▽ The National Policy for Children, 1974
- ▽ Integrated Education of Disabled Children (IEDC), 1974
- ▽ The National Policy on Education (NPE) formulated earlier and was acted upon in May 1986.
- ▽ The International Year for the Disabled Persons (IYDP), 1981
- ▽ Project Integrated Education for Disabled (PIED), 1987
- ▽ Mental Health Act, 1987
- ▽ The Program of Action, 1992
- ▽ The Persons with Disabilities (Equal Opportunities, Full Participation and Protection of Rights) Act, 1995

- ▽ The Economic and Social Commission for Asia and Pacific (ESCAP)
- ▽ The National Trust for Welfare for Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999

TREATMENT

Many types of techniques are used in treating mentally retarded children. Residence treatment which was started in 1960 in which Medical care was provided and house hold routines were practiced. Then behavioral treatment in which behavioral objectives defined and skills are taught in small sequential steps i.e food, toilet etc. This is also used to reduce inappropriate behavior. Cognitive treatment and computer assisted education are also used in training children.

BEHAVIOR MODIFICATION

There are five major steps in implementing a behavior modification program;

1. Identification of the problems.
2. Defining target behaviors.
3. Behavior recording.
4. Functional analysis.
5. Treatment procedures and their evaluation

In identification of problem we will make a list of problematic behavior (beating, head banging, wandering, abusing etc) of individual by using behavior checklist. In functional analysis we will analyze the relationship between a behavior and the immediate social environment. By a systematic enquiry into the ABC of behavior, A- Antecedents or events immediately before the behavior and environmental setting in which it occurs, B-Behavior, its frequency, duration and intensity, C- Consequences or events following behavior. In behavior procedures of management we will analyze the antecedent and consequences of behavior. Management will be planned for changing antecedents or consequences. Behavior modification of decreasing undesirable behavior include - Restructuring the environment, Extinction, Punishment and Differential Reinforcement. Increasing desirable behavior can be done by three types of reinforcers:

- (a) Primary reinforcer- These are reinforcer which are essential for life (food, drink, sleep etc.)
- (b) Secondary reinforcer- These are the events or objects which have the property of a reinforcement (money, point)
- (c) Social reinforcer- These are the events which have significance at the emotional level (attention, smile, hugging).

TECHNIQUES FOR INCREASING DESIRABLE BEHAVIOUR

Token economy: token economy is a system of behavior modification based on the systematic reinforcement of target behavior. The reinforcers are symbols or "tokens" that can be exchanged for other reinforcers, Shaping. – build up a new behavior: This is a behavioral term

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that refers to gradually molding or training an organism to perform a specific response (behavior) by reinforcing any responses that are similar to the desired response, Prompting: A prompt can be defined as a cue or hint meant to induce a person to perform a desired behavior. A fancy way of saying this is: An antecedent that induces a person to perform a behavior that otherwise does not occur, Fading: An action is gradually withdrawn until the need for it fades away, Chaining: It involves reinforcing individual responses occurring in a sequence to form a complex behavior, Imitation: Imitation is an advanced behavior whereby an individual observes and replicates another's behavior, Generalization: Generalization is a phenomenon in psychology where conditioned subjects respond to stimuli similar to those they were conditioned to respond to, Discrimination: The ability to perceive and respond to differences among stimuli.

SUMMARY AND CONCLUSION

Mental retardation have a long history and modified a lot in long run. Definitions were made and modified. We cannot specify that one particular reason or cause is responsible for mental retardation. Many persons with mental retardation also have associated problems. Only very limited services were available in India until the period of the Colonial rule. Now we have our own screening tests, different programmes and schools. With the rights approach established through several legislations, the quality, accessibility, affordability and availability of an array of services have been strengthened. We have many approaches towards mental retardation and behavior modification is an important aspect.

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Interpersonal Relationships among College Students: an Assessment

J. Parameswari¹

ABSTRACT:

Developing and maintaining interpersonal relationship is important for success in life. Interpersonal relationship serves as a base for social support that plays a crucial role particularly in emotionally charged situations. It is also noted that interpersonal relationship enhances overall wellbeing of man. The present study is done to find out how students behave and what kind of behavior they expect from others. For this purpose, FIRO – B questionnaire developed by Schultz (1958) was used with a sample of 200 college students who were selected through stratified random sampling method from two colleges in Salem city. The strata used in this study are gender, discipline and order of birth. The collected data were analyzed using t-test that revealed significant gender difference in expressed inclusion and wanted control dimensions of interpersonal relationship. Further, arts discipline students significantly differed from science discipline students in wanted control. There was a significant difference in expressed inclusion and wanted affection based on order of birth of the students.

Keywords: *FIRO –B, interpersonal relationship, college students, adolescents.*

BACKGROUND:

Interpersonal relationship is the relationship between two or more individuals. Human beings are gregarious in nature. Though being social is innate nature of mankind, life experiences help in shaping the relationship with others. Developing and maintaining interpersonal relationship is important for success in life. Interpersonal relationship serves as a base for social support that plays a crucial role particularly in emotionally charged situations. It is also noted that interpersonal relationship enhances overall wellbeing of man. Goswami(2012) studied the positive and negative quality relationship and wellbeing of children and reported that positive relationship with family, neighbourhood and friends increases wellbeing of children, whereas negative relationships tend to decrease their wellbeing. Among students, relationship determines their achievement and also relationship encourages performance (Aspelin, 2012). Interpersonal relationship predicts emotional distress. Students with high level of interpersonal relationship showed low level of emotional distress (Kenny, Dooley & Fitzgerald, 2012)

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AIM:

To assess college students' behavior towards others and their expectation from others.

HYPOTHESES:

1. There is a significant gender difference in interpersonal relationship
2. Arts and science students differ in their interpersonal relationship
3. Students significantly differ in their interpersonal relationship based on their order of birth

RESEARCH METHOD

Sample

A sample of 200 college students were selected through stratified random sampling method from two colleges in Salem city. The strata used in this study are gender, discipline and order of birth.

Tool used:

FIRO – B questionnaire developed by Schultz (1958) was used to measure interpersonal relationship of adolescents. This questionnaire consists of 54 questions to be answered on a 6 point scale. This scale has good reliability with inter-rater reliability ranging from 0.85 to 0.96 and test-retest reliability ranging from 0.71 to 0.85.

RESULTS AND DISCUSSION

Table 1: Gender difference in interpersonal relationship

Dimensions of interpersonal relationship	Gender (N=100 each)	Mean	SD	t- Value
Expressed inclusion	Male	3.83	1.16	3.31*
	Female	4.54	1.80	
Expressed control	Male	3.75	1.47	0.65
	Female	3.90	1.75	
Expressed affection	Male	3.72	1.32	0.29
	Female	3.66	1.92	
Wanted inclusion	Male	2.73	1.33	1.59
	Female	2.37	1.84	
Wanted control	Male	5.86	1.92	5.83*
	Female	4.17	2.17	
Wanted affection	Male	3.17	1.46	1.79
	Female	2.78	1.62	

*Significant at 0.05 level

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From the above table it is seen that there is a significant gender difference in two sub-dimensions of interpersonal relationship, namely expressed inclusion and wanted control. Bakken and Romig (1992) in their study reported gender difference in expressed control and wanted affection. They reported that males showed high preference for expressed control and low preference for affection, whereas females showed preference for affection and low preference for expressed control. In the present study, girls show high level of expressed inclusion compared to boys. By nature girls prefer being in group. They while-away their time discussing or gossiping with their group. They feel more comfortable in a group than alone. They show their real self in the group than when they are alone. This may be the reason for their high score in expressed inclusion. Boys show high preference for wanted control than girls. It is rare for boys to be emotionally close in their relationship. They have different group of friends to meet their different needs. For example, boys may have a friend to accompany them for shopping, another friend to guide in taking important decisions. Boys may not know to effectively use the autonomy given to them. They need someone to guide them in the right direction. These may be the reasons for their score in need for wanted control.

Table 2: Difference in interpersonal relationship based on discipline

Dimensions of interpersonal relationship	Discipline (Science=106Arts=94)	Mean	SD	t- Value
Expressed inclusion	Science	4.22	1.73	0.31
	Arts	4.15	1.33	
Expressed control	Science	3.87	1.76	0.40
	Arts	3.78	1.45	
Expressed affection	Science	3.78	1.72	0.85
	Arts	3.59	1.54	
Wanted inclusion	Science	2.41	1.58	1.35
	Arts	2.71	1.62	
Wanted control	Science	4.64	2.31	2.59*
	Arts	5.44	2.03	
Wanted affection	Science	3.01	1.58	1.38
	Arts	2.94	1.52	

*Significant at 0.05 level

The above table makes it clear that there is a significant difference in wanted control between students of art and science discipline. Students from arts discipline have high need for wanted control than the students from science discipline. From the secondary school onwards students of science stream have a defined goal and also have the motive to reach the goal. They work on their own and know how to attain their goal. Even if they have no concrete goal, their degree will fetch them a job. But this is not so with the arts discipline students. The students of arts stream tend to be lethargic and have no concrete plan for their future. This is because they are not sure

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of the scope of their subject. Most of the arts students lack the skill to sell their talents. Therefore, they are in need of guidance in setting goals and taking decisions about their career especially.

Table 3: Difference in interpersonal relationship based on order of birth

Dimensions of interpersonal relationship	Order of birth (First born=80 Later born=92)	Mean	SD	t- Value
Expressed inclusion	First born	4.55	1.53	3.69*
	Later born	3.71	1.45	
Expressed control	First born	3.92	1.51	0.79
	Later born	3.74	1.59	
Expressed affection	First born	3.71	1.73	0.28
	Later born	3.64	1.52	
Wanted inclusion	First born	2.61	1.72	0.64
	Later born	2.46	1.49	
Wanted control	First born	5.09	2.46	0.35
	Later born	5.21	1.99	
Wanted affection	First born	3.34	1.50	2.74*
	Later born	2.71	1.52	

*Significant at 0.05 level

Table 3 shows the difference in interpersonal relationship based on order of birth. It is clear from the table that there is a significant difference in expressed inclusion and wanted affection between first born and later born adolescents. First born children show high need for expressed inclusion than later born children. It is natural for elder children to show concern, attention and care for younger ones at home. This behavior tend to extend to social settings also.

First born children also show a high need for wanted affection compared to later born children. Parents tend to show more attention and care to younger child than the elder child, believing that the elder child can take care of self. At this stage the elder child may feel left out and their need for affection may increase.

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Psychology of Lying

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ABSTRACT:

Lying is a part of communication and a form of social behavior which is involved in interacting with others. Lying means saying a statement that he/she knows themselves as false to others to whom he/she want to perceive it as true. It can be explained by different psychological principles of psychodynamic theory, humanistic theory, behavior theory etc. Lying arises from hedonistic nature of humans that to avoid pain and to increase pleasure. It can be also seen that we lies not only for personal gains but also for others gain too. That is to avoid harm affecting ourselves and to avoid hurting others. Lying can be accepted if it saves someone's life-ourselves or of others.

Keywords: *Psychological factors, Lie*

INTRODUCTION:

Lying is a form of deceiving others verbally. It is a part of our behavioral response in communicating with others. It has long been a part of everyday life. We can't get through even a single day without telling lies. It is a consistent feature of human social behavior. We are not aware of all the lies we tell. We people lie most the time in our daily life, afraid of other people finding out the truth about us. We lie mostly to our parents, partners, friends, supervisors and so on to whomever else with whom we interact. We lie for many reasons. Sometimes to get rid of the troubles or sometimes to escape from the responsibilities. We think of the possible shame or threat occurring when the truth is revealed. So we find possible solutions in the form of lies. It is a lazy way to solve a problem. Research on the self-reported frequency of lying indicates that in the course of their normal daily activities, people lie in about 25% of their interactions with others (DePaulo & Bell, 1996; DePaulo & Kashy, 1998; Kashy & DePaulo, 1996). The difference in lying only exists in its severity, the frequency and target or the reasoning behind the lies. Lie of omission can also be seen which means simply remaining silent with a deceptive intention. Lying can take two forms also, a response to short term issue which requires little planning and long term lying which requires much planning.

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While going through the theoretical explanations of lying it was found that it was strictly and seriously studied by many researchers. The term lie literally means a deliberate untruth. Even though there is no universally accepted definition of lying (Kagan 1998), it is defined in many ways. The Oxford English Dictionary defines lying as making a false statement deliberately by someone who knows it is not true (Hawker, 2006). The most commonly accepted definition of lying that manages to avoid these problems is that a lie is an assertion, the content of which the speaker believes to be false, which is made with the intention to deceive the hearer with respect to that content (Williams 2002); or, more formally it is explained as a person lies when he asserts something to another which he believes to be false with the intention of getting the other to believe it to be true (Kupfer, 1982)

Dawson in his blog explains four different types of liars. *The Occasional liars* are those people who seldom lie. But when they do, they are blown away by their actions and feel guilty for what they have done. These types of people are the ones who are quick to seek forgiveness from the person they lied to. The occasional liars are not perfect, but are usually respected for their strong attempt at being a truthful person, and humble enough to admit their mistakes. If we were all honest with ourselves, we would have to admit we are at least an occasional liar. *The Frequent liars* are those who go about his/her life lying every which way. These types of people were not concerned about covering their tracks, or making sure their lie makes sense. Everybody knows these people are lying because they are sloppy with their lies. These persons have very few friends, because people get sick of his obviously twisted stories. Third type, the *smooth liar* is just what their description sounds like this person has become very smooth and skilled at telling lies. These liars are so good with words and body language people tend to believe them even when they know they have a reputation of being a liar. Yet, all the time, the smooth liar knows they are lying. These people are fun to be around, and very entertaining, but after being found out, the smooth liar tends to move on to others to whom they can apply their dark talents. Fourth type *the compulsive liar* lies when they don't have to, even if telling the truth makes more sense than the lies they tell. These people have an addiction to lying, and they simply cannot stop. They are out of control. They spend hours studying situations trying to come up with more lies that will allow them to maintain all their previous lies. These people are totally untrustworthy and end up unable to keep friends. A compulsive liar ends up a lonely, sad person who tragically lies the most to their own self (thehopeline.com).

The psychology of lying can be a complicated concept because people lie for different reasons. What induces a person to not tell the truth explains the causes for our lying behavior. While some people lie in an attempt to avoid punishment or to avoid hurting someone else's feelings, others lie out of impulse or because they want to present themselves as someone they are not. Motive for lying varies throughout our lifespan period also. During childhood children usually lies for pleasure and to escape from the punishments of parents or other authority figures. As we get older lying is found to have a survival value. That is we lie to protect ourselves from the

perceived threat to our existence or wellbeing. In order to ensure our safety we lie and hide the truth.

Motives or the reasons for lying behavior can be explained based on various concepts and theoretical foundations contributed by eminent theorists of psychology. There are many explanations for why people lie. Lying can be explained based on the psychoanalytic explanation of Sigmund Freud as the interplay of id, ego and super-ego. Ego is that level of mind which works according to the reality principle. Sometimes we are forced by our id to stay away from the reality since the reality evokes anxiety within us. We are afraid to face the reality and hence we hide the truth and we lie. When the ego cannot cope with some distressing stimuli it finds an alternative by making justifications through lying. Super-ego the moral arm of our personality may also have role in this. Super-ego wants us to be perfect in any sense. So in order to save us from imperfection we lie to make ourselves perfect in the eyes of others and in our own eyes too. That is, a kind of defense mechanism is working through, in deciding what to lie and how to lie. Lying can hide or alleviate conflicts or stresses that give rise to anxiety. Sometimes we are denying the truth from coming to our conscious mind or sometimes we are creating justifications for our undesirable or unacceptable behavior by making use of untruth statements.

From a behavioristic point of view, it can be said that lying behavior patterns are acquired through learning like learning other simple and complex behavioral responses. Once the lying behavior of an individual is reinforced by favorable consequences, the behavior pattern gets repeated and becomes a part of behavioral repertoire. They repeat the same when they are in need of the same consequences.

Lying can also be explained based on the Maslow's hierarchy of need. According to his theory we have an innate tendency to move towards achieving our needs one after the other. In order to achieve these levels and to prevent the obstacles from coming way to our need satisfaction we make statements which may be not true. When we feel that we need to say a lie to get our food we lie. When we are satisfied with our food, our need goes further for need for belongingness. And if there arises any kind of hindrance of its satisfaction we make statements which facilitate our need satisfaction disregarding of whether it is true or false. Liars can also seem to possess high narcissistic traits. That is we all lie for our personal causes. So because of our excessive love for ourselves and to save ourselves from anxiety we lie.

It is a crucial question that whether a lie has a different neural pattern than a truth. Neuropsychologists know that there is a distinct difference in brain activity when a person tells the truth as opposed to when a person tells a lie. Different parts of the brain are used to deliberately tell a falsehood than are used to speak the truth, so from a neuropsychological viewpoint, there is a distinct difference between the two (Addiction.lovetoknow.com). In psychiatry, pathological lying, also called compulsive lying, is a behavior of habitual or compulsive lying (Dike, Baranoski, Griffith, 2005). It was first described in the medical literature in 1891 by Anton Delbrueck (Dike & Charles, 2008) The individual may be aware they are lying, or may believe they are telling the truth, being unaware that they are relating fantasies.

There are mental disorders that may result in patients telling lies, but not realizing that what they are saying is not true. Examples include Paranoid Personality Disorder or some of the Dissociative Disorders (Addiction.lovetoknow.com).

In a meta-analytic study by Bond and DePaulo (2006), they examined the accuracy rates of lie detectors in 206 studies. They found that, on average, people were accurate in only 54% of their lie-truth judgments, whereas one would expect 50% accuracy by chance alone. Understanding the subtle indications of lying would certainly benefit anyone wishing to detect lying and deception in others.

Despite the rather unimpressive success most people have at lie detection, scientific investigations have uncovered a few noteworthy approaches to detecting deception. There is a rather long history of using physiological measures such as the polygraph to detect evidence of deception (Larson, 1927; Marston, 1917). More recently, researchers have attempted to use measures of brain activity to identify liars (Langleben, 2008). It should be noted that physiological measures are only indirect measures of lying and therefore questions about the validity of using them to detect deception remain (Honts, 1994; National Research Council, 2002; Spence, 2008).

In a study by Hart, Fillmore, & Griffith in 2009 entitled Indirect Detection of Deception-Looking for Change, the researchers examined the effectiveness of using indirect methods to detect liars. College students viewed a video in which half of the people told some lies and half of the people were entirely truthful. Participants were 104 (53 males, 51 females) undergraduate students at a small coeducational university in the southern United States. They were either asked to detect the liars in the video or they were asked to identify people in the video whose behavior, mannerisms, or speech changed. Participants using the indirect lie detection method of looking for behavioral change were more accurate in their categorizations of liars and non-liars than were participants who were directly and explicitly looking for liars. The study adds to a growing body of evidence that indirect lie detection strategies may offer some advantages in accuracy over more direct behavioral detection of deception (Anderson, 1999; Anderson, DePaulo, & Ansfeld, 2002; Granhag, 2006; Hurd & Noller, 1988; Vrij, Edwards, & Bull, 2001). This growing body of evidence suggests that if people can be disengaged from their stereotype-driven deception detection strategies, they might detect important and meaningful behavioral cues that would have otherwise gone unnoticed. So it will be vital to explore the variety of indirect approaches that might yield better detection of liars.

Researchers have examined verbal communication cues of deception. Speech cues such as pauses, voice pitch; interruptions, hesitations, latency to respond, and response length have been used to detect deception (Vrij, 1995; Vrij, Edward, & Bull, 2001; Vrij, Edward, Roberts, & Bull, 2000). The contents of speech such as descriptions of feelings, reproductions of speech, amount of detail, logical inconsistencies, and spontaneous corrections have also been found to vary with the veracity of statements (DePaulo, Lindsay, Malone, Muhlenbruck, Charlton, and Cooper, 2003; Vrij, Edward, Roberts, & Bull, 2000). The validity concerns previously noted with

physiological measures also exist with the measures of speech cues. While certain variables of speech may change when one lies, those changes can and do occur for other reasons not tied to deception. Historically, humans have looked to non-verbal behavior for indications of another's honesty or mendacity. Three major themes currently exist to explain the presence of non-verbal indicators of deception, each with its own unique contribution (Vrij, 2000). First, the emotional arousal hypothesis suggests that deception produces various emotional states which may influence non-verbal signals. For example, liars may experience fear, which may contribute to nervous movements or fidgeting. Second, the cognitive hypothesis focuses on the mental work load of deception and proposes that lying requires more cognitive effort which detracts from the liar's ability to behave normally. Thirdly, the behavioral control hypothesis suggests that liars may attempt to counteract any potential signs of their deception, but in the process come off as unnatural. Thus, if a liar is trying to manage several possible verbal and non-verbal cues to their deception simultaneously, their behavior may actually appear less natural and spontaneous due to their own heightened behavioral awareness and control. For instance, researchers have found that many people believe that liars make less eye contact, increase their fidgeting, and shift their posture (Akehurst, Kohnken, Vrij, and Bull, 1996; Hart, Hudson, Fillmore, & Griffith, 2006).

Stromwall, Granhag, and Hartwig (2004) suggested that for laypersons, the likely factors resulting in these wrongful beliefs include several psychological factors. First, the representativeness heuristic, or our tendency to assume that a sample or incident is an exemplar of the overall population, could lead people to generalize from a small set of experiences in which liars are exposed. Second, confirmation bias, the tendency to look for confirming instead of disconfirming evidence, could explain how certain misconceptions are propagated by people not looking for evidence that their beliefs are wrong. Thirdly, it is also possible that feedback plays a crucial role in our many misconceptions. For feedback to be corrective of misconceptions, it should take place often, be consistent, and happen promptly (Allwood & Granhag, 1999; Ekman, 2001).

In two diary studies of lying by Epstein, DePaulo, Kirkendol, Kashy & Wyer in 1996, 77 college students reported telling two lies a day, and 70 community members told one. Participants told more self-centered lies than other-oriented lies, except in dyads involving only women, in which other-oriented lies were as common as self-centered ones. Participants told relatively more self-centered lies to men and relatively more other-oriented lies to women. Consistent with the view of lying as an everyday social interaction process, participants said that they did not regard their lies as serious and did not plan them much or worry about being caught. Still, social interactions in which lies were told were less pleasant and less intimate than those in which no lies were told.

From the current review of lying, it can be concluded that lying is a part of communication and a form of social behavior which is involved in interacting with others. Lying means saying a statement that he/she knows themselves as false to others to whom he/she want to perceive it as true. It arises from hedonistic nature of humans that to avoid pain and to increase pleasure. It can be also seen that we lies not only for personal gains but also for others gain too. That is to avoid

harm affecting ourselves and to avoid hurting others. So we can come to an end of the article by saying that lying can be accepted if it saves someone's life-ourselves or of others.

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Adjustment and Psychological well-being among of Call center employees

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ABSTRACT:

The purpose of present study was to find out correlation between the Adjustment and their Psychological well-being among of Call center employees. The said sample was 240 both males and females in equal numbers was selected through random sampling. Adjustment Inventory & Psychological well-being Inventory are tailor-made instruments, having sufficient reliability and validity. For the purpose of analysis, The Karl-Pearson 'r' technique was used. Present study reveals the result that there is significant Positive correlation between the Adjustment and Psychological well-being among of Call center employees. The authors suggest that there is a need to explore the rural and the urban correlation in the line of above study.

Keywords: *Adjustment and Psychological well-being.*

INTRODUCTION:

R.L. BHARSAKHALE (2013) A study of marriage attitude and adjustment among art and science faculty students by employing a sample of 140 subjects in which 70 subjects were Arts faculty were Arts faculty (35 Male and 35 Female) and 70 subjects were Science faculty (35 Male and 35 Female) with age ranging from 21 to 24 years located From Aurangabad District were selected. The Marriage Attitude scale. This scale was developed and standardized by Pramod Kumar and An Adjustment Inventory (for school and College pupils). This scale was developed and standardized by Dr. Penni Jain. A factorial design was used; since there were two independent variables i.e. Faculty and Gender. A 2x2 factorial design was used to analyzing the data. It was found that the Science faculty students have positive marriage attitude from the arts faculty students and Science faculty students have good adjustment than arts faculty students.

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Kim, Sooyeon, Brody, Gene H. (2005) Longitudinal Pathways to Psychological Adjustment among Black Youth Living in Single-Parent Households. A 5-wave model linking family and maternal functioning to youth psychological adjustment was tested with 139 single-mother-headed African American families with young adolescents (mean age = 11 years at recruitment) living in the rural South. Structural equation modeling indicated that an accumulation of family risk factors at Wave 1 was linked with maternal psychological functioning at Wave 2, which forecast competence-promoting parenting practices at Wave 3. These parenting practices indirectly forecast youth externalizing and internalizing behaviors 2 years later at Wave 5, through youth self-regulation at Wave 4. The hypothesized model was retested, controlling for Wave 1 youth externalizing and internalizing behaviors. All paths remained significant, indicating that the model accounted for change in youth psychological adjustment across 4 years. Thus, it becomes clear that the above studies youth adjustment and Psychological well-being are associated with each other.

During the last two decades, mental health has to be define in terms of psychological well-being low psychological well-being is illustrated in anxiety, depression, low morale, lack of self-confidence, low sense of personal autonomy, inability to cope with the problems of living and dissatisfaction with one self and the physical environment. Mental health is fundamental component of health through which one realizes one's own cognitive affective and relational abilities. It can be define as the ability to adjustment to the environment on the plan of reality. "Well-being is a positive and sustainable condition that allows individuals, groups or nations to thrive and flourish. (Huppert, Baylis & Keverne., 2005)"

Numerous studies have investigated effects of working conditions on strain (Kahn & Byosiene, 1992; Sonnentag & Frese, 2003). Moreover, job demands like job complexity and variety have the same effects on well-being and job-related attitudes as resources at work as long as they do not overtax a person's capabilities and as long as they allow utilizing one's skills, knowledge, and abilities and therefore, promote learning. Positive relationships of job complexity and variety with well-being and job-related attitudes have been reported both in the literature on stress at work in general (Kahn & Byosiene, 1992; Sonnentag & Frese, 2003; Warr, 1999) and specifically for call agents, while control, complexity, and variety are associated with well-being, good health, and positive job-related attitudes, the opposite applies to stressors at work. Holman (2002) described findings for four measures of well-being, namely, anxiety, depression, intrinsic and extrinsic job satisfaction. Deery, S., Iverson, R., & Walsh, J. (2002) conducted research in five call centers of a large Australian telecommunications organization. The Deery(2002) paper is concerned with the identification of the factors that are associated with emotional exhaustion and the frequency of absence amongst call center employees.

METHOD

Study method is presented below.

OBJECTIVES

To check correlation between adjustment and Psychological well-being of Call center employees.

HYPOTHESIS

There is no correlation between adjustment and Psychological well-being of Call center employees.

SAMPLE

The respondents of the present study 240 people randomly selected from various areas in Ahmedabad district. In present research the total sample consisted of 120 male and 120 female Vodafone company Call center employees were chosen.

TOOLS

1. REVISED ADJUSTMENT INVENTORY (RAI)

The revised adjustment scale was made by Pramodakumara (1997). Giving a total of 40 statements. These statements answer 'yes' or 'no' is given in. Its main purpose is to understand the person's general adjustment. In this scale statement no. 33 are positive and others statements are negative. The questionnaire Reliability and validity of this scale was high.

2. PSYCHOLOGICAL WELL-BEING INVENTORY

Psychological well-being Questionnaire it was developed by Bhogle and Prakash (1995), was used to measure Psychological well-being. The questionnaire contains 28 items with true and false response alternative. It covers 13 dimensions of psychological well-being. The maximum possible score is twenty eight and minimum is zero. High score indicates high level of psychological well-being. The test – retest reliability coefficient is 0.72 and internal consistency coefficient is 0.84. The author has reported satisfactory validity of the questionnaire.

PROCEDURE

In this research two test were administrated individually as well as on Call center employees, which collecting data for the study before attempting the questionnaire the subjects were requested to read the instruction carefully and follow them in true spirits. While the data collection was completed then 'r' was used to check correlations.

RESULTS AND DISCUSSION

Table-1

Correlation calculation between Adjustment and Psychological well-being of Call center employees.

Sr. no.	Variables	N	df	R	Sig. Levels
1.	Adjustment	240	238	0.34	0.01
2.	Psychological well-being	240	238		

Concluded from the table is that the Adjustment and Psychological well-being a positive correlation of 0.34 between the occurs. Moderately positive correlations that can be called. Around Adjustment and Psychological well-being meaningful correlation between the occurs. Hypothesis is therefore to be rejected and the conclusion is that the Adjustment and Psychological well-being are associated with each other. Means that if one increases the other will increase.

CONCLUSION

The study presented in Call center employees Adjustment and Psychological well-being of which are connected to each other in check. Meaningful result was found. Variable moderately correlation was seen between the two. Thus, Adjustment and Psychological well-being is correlated with each other moderately solid. Be the case.

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Living Arrangement of Elderly in Haryana:

A Case Study of District Rohtak

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ABSTRACT:

In the present paper, we have analyzed the living arrangement of elderly in district Rohtak, Haryana. We have interviewed 500 elderly of different age groups in 2012. The study found that elderly is cared as about 90 per cent elderly stay in joint families. Not a single respondent male was living alone whereas 0.5 percent females in rural areas and 2.5 per cent in urban areas are living alone. The poor elderly are more satisfied than the rich elderly.

Keywords: *Elderly, living arrangement, Haryana.*

INTRODUCTION:

The emerging changes in the age and sex structure of India's population, particularly at old and older ages will have a profound impact on the demographic landscape and are expected to pose multifaceted developmental challenges. A major demographic issue for India in the 21st century is population ageing, with wide implications for economy and society in general. With the rapid changes in demographic indicators over the last few decades, it is certain that India will move from being a young country to an old country over the next few decades.

Presently, India has around 90 million elderly and by 2050, the number is expected to increase to 315 million, constituting 20 per cent of the total population. Around three-fourths of the elderly live in rural areas, of which 48 per cent are women and 55 per cent of them are widows. Nearly 70 per cent of rural elderly are dependent on others. The majority of the people at 60+ in India are socially backward and economically poor. The Indian society is moving from traditional rural society to modern urban society. This has posed a serious threat to the well being of this vulnerable section of the society. In the western societies the elderly are prepared for the hardships in the young age itself and the governments are responsible for providing social security but in the developing countries like India, the picture is grim.

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Care is one of the fundamental UNs principles that address the older persons. Care broadly encompasses concern, support and the art of nurturing of old age persons particularly in the context of family. Care for older persons has assumed a different dimension in the modern times because of increasing longevity of life, increasing number of older persons, changes in the nature and structure of family and socio-economic background. The current scenario is such that the families are getting smaller and values are deteriorating. Universally, it is agreed that the aged often arrive at a stage in life when they need looking after by others- irrespective of their economic status. The probability of this happening has been found to be much higher in 80+ age group than among the rest of the aged. It is also true that the chances of such care needing aged people being economically independent are much higher in developed countries than the developing countries. Therefore, the question arises about the manner in which age care to be delivered. Until recently, it was thought that there are only two alternative models of old age care. One is the joint family system in which old co-habit with and looked after by the rest of the family. This kind of care system is still largely practiced in India, though it is weakening. The alternative system is the one which prevails in the West and slowly penetrating in the Indian systems too is leaving the aged to fend themselves, mostly in old age homes.

Role of Family

The household structure and family support for elderly are becoming increasingly important. The family is the key institution for older adults, and their living arrangements are a fundamental determinant of their well-being (Albert and Cattell, 1994; Cowgill, 1986]. The Indians are bound by cultural values, which emphasize that the elderly should be taken care by offspring and treated with honour and respect. It is evident from the fact about 80 per cent of the elderly live with their children. The percentage of such elderly is higher in the case of widowed (Rajan and Kumar 2003; Panda 1996). Though only about 20 per cent elderly are not living with their family yet it a matter of concern. The Indian family system which was once a matter of proud is in the recent years at the verge of collapse. The traditional values are modified which has posed a serious threat to the well being of elderly people. In the recent years everything is weighted in terms of money including the elderly. The net effect is that they are neglected and isolated in their own families and society. It has resulted a rapid change in the situation, values and role of the elderly. All these issues bring out other related issues like lonely living, living in old-age homes, facilities of day care centres, mobile health care, old-age pension, security etc., (Panigrahi, 2010).

The traditional extended family system is a principal social institution in India. The people in India are bounded by cultural values which emphasizes that the elderly should be taken care by offspring and treated with honour and respect. The elderly population are highly respected by the traditional family system due to their age, experience and wisdom. Vlasoff (1990) has cited the importance of son in India in a case study on widows. Living with sons at older ages had been a norm of the society.

Living arrangement is viewed as the best indicator to understand the status and the wellbeing of the elderly in the society. The study conducted by Palloni (2001) indicates that the living arrangement refers to the familial system. The concept of the living arrangement is usually

explained in terms of the type of family in which the elderly live, the headship they enjoy, the place they stay in and the people they stay with, the kind of relationship they maintain with their kith and kin, and on the whole, the extent to which they adjust to the changing environment (Irudaya Rajan *et al.* 1995). The living arrangements in fact are the reflection of economic development, cultural practice and perception of the society towards the old age people. Generally three types of arrangements are noticed. For, in the developed countries more women than men are living alone whereas in the developing countries both men and women live together with their children. The old age home which were once common in west are now coming up in the developing countries. The literature broadly classifies the living arrangements as alone and co-residence. Living alone covers the living arrangements where the older adults live alone or with spouse. Co-residence indicates living with children or other such type of arrangement. The available evidences show that about 80 per cent of elderly in India live with their children. But because of urbanization and change in the perspective of the younger generation the situation is changing fast. For, it was estimated that about 90 per cent of the adult children considered the care of elderly as their duty in 1984 but the share of such children declined to 77 per cent in 1994. An all-India survey conducted during 1995-96 estimates the older adults living alone to be 15 per cent and 12.5 per cent in rural and urban areas respectively. At the end of 2003 there were 379 old age homes running in India and the number of beneficiaries was 9575. This figure is mere 0.01 per cent of the older adult population of India.

The current situation is such that in spite of all the hardships and mental agony the old in rural India are still living with their family, irrespective of the fact that whether they are cared or not. However in well off Indian families particularly in urban India the trend is in favor of old age homes. Not surprisingly, the state of Kerala, noted for its quality of life also had the highest number of old age homes. Irudayarajan (2002), in his study of these homes, found that 67 per cent of the inmates moved here because no members of their families were free and available to take care of them at their respective homes. Jamuna (2005) has reported that the preference for the co residence of the elderly members with the rest of the family declined from 81 per cent in 1984 to 51 per cent in 2001. The important aspect about living arrangements is that aged moving into old age homes or staying separately does not mean breaking of family links.

Loneliness is a major health risk for the elderly and it can increase the risk of premature death by 14 per cent. The consequences to health are dramatic as feeling isolated can disrupt sleep, elevated blood pressure, increase morning rise, alter gene expression and increase depression (Kounteya S. 2014). Older people living alone are not necessary lonely if they remain socially engaged and enjoy the company of those around them.

Changing perspectives of living

In less developed countries such as India, the elderly often live with relatives, and are valued, even revered, for their wisdom and experience. This pattern used to occur in the west too, but is far less common now.

Two pattern of living are noticed around the world: One, your parents don't want to live with you if they don't have to. They like their independence, and they don't want to move into your home and follow your rules. You don't want to live your adult life following their rules either. So the solution that people often come to is living at 'an intimate distance' — near one another, but apart. The second works until your parents can't take care of themselves anymore. Hence those who have the resources, choose "intimacy at a distance (Gawande, 2014).

Old age homes are neither popular nor feasible among majority of Indian but in recent years a new trend has emerged in India where the old age has become a business opportunity. The developers are coming forward to built and manage the old age homes in the metropolitan cities and selling houses specially designed for old age people at high prices. "Living together but apart" and "Living separately together is better for all," concept is catching with real estate developers. Last year, Divya Sree Developers announced a new project 77° Place, with 'Linked Joint Family Homes' - homes designed for multigenerational families. Often referred to as a 'doublement', each units consists of two attached apartments, one of which is larger than the other (Sharabonti, B. 2014). The relationship which has strong emotional and caring bonding is now turned into a professional relationship.

OBJECTIVES

The only objective of the current study is to examine and analyze the living arrangements of elderly in district Rohtak of Haryana, India.

DATA AND METHODS

The present study is empirical in its treatment of the theme of inquiry. The requisite information is obtained from primary as well as secondary sources. Secondary data were obtained from National Sampling Survey Organization (NSSO1995-1996, and 2004), Help Age India and Census of India. To develop an in-depth understanding about the neglect, violence, abuse meted by the elderly and the attitude of society towards elderly, a field survey was conducted in 2012 in District Rohtak, Haryana. In all, 500 respondents of 60+ age spreading over five development blocks were randomly selected. The selection of number of respondents is a function of per cent share of elderly to the total population of elderly. This way, 50 respondents were selected from Lakhan Majra and Sampla, 100 from Maham and Kalanaur and 200 from Rohtak. During the survey, due attention was given to the age of respondents. For, maximum numbers of respondents were selected from amongst 60-69 age group followed by 70-79 age groups. Least number of respondents was selected from 80 + years age. Simple percentages, graphs and charts are applied to unhide the issues related to the elderly in Rohtak.

STUDY AREA

The study area Rohtak District lies in the south eastern part of Haryana between 28° 09' North latitude and 76° 57' East longitudes. Elderly population accounted for about 7.87 per cent of the total population whereas the percentage share of elderly in the study area is 9.2 in 2001. The district is having an area of 1668.47 square kms

RESULTS AND DISCUSSION

Till recent past, living arrangements for elderly in India, like other developing countries was not an issue as India was predominated by traditional agrarian society. Around 70 per cent of its population lived in rural areas and depended upon agricultural and allied works for their livelihood. Filial roles and responsibilities are strong in Indian society. Even today extended family is prevalent, particularly in rural India which is viewed as the only social institution which provides care and support to its members including elderly persons. The living arrangements are affected by various factors like marital status, health condition, financial dependency as well as cultural tradition and social support available to the elderly (Van Solinge, 1994).

National Sample Survey Organization (NSSO) identified six categories of living arrangements. These are living alone, living with spouse only, living with spouse and other members, living with children, living with other relatives, living with non-relatives, living alone as an inmate of old age home. In India, marital status of a woman rarely changes after being widowed. According to NSSO 42nd round, there were 654 widows and 238 widowers per 1,000 old persons in rural areas. The respective figures were 687 and 200 for urban areas. More than 65 per cent of Indian women live without a spouse as compared to 29 per cent of older men. As per the NSSO 2004 estimates 59.7 per cent rural elderly males are living with spouse and other members whereas 16.2 and 16.8 per cent are living with spouse only and children respectively. The share of living alone and with other relatives is almost same i.e. 2.75 per cent. In case of rural elderly females though the percentage of living with children and spouse and other relatives is almost same but the per cent share of elderly living with children and spouse and family is reversed. For, about 47 per cent are living with children and 28.7 per cent with spouse and other relatives. About 14 per cent rural elderly females are forced to live either alone or at the mercy of relatives and non relatives. The figure for this category for males is only 5 per cent. Living arrangements in urban areas for both the sex follow similar pattern. As per Help Age (2013) a huge number, 83 per cent of the elderly, live with their family as compared to 11 per cent who live with their spouse. On the other hand, 6 per cent reported to be staying alone.

Haryana is male dominant society where they have financial as well as social control over the family. The NSSO reported not a single case where the males are living alone whereas about 6 per cent females in urban areas and one per cent in rural areas are living alone. The probable reasons are that elderly males are generally owners of the land. The high percentage females living alone may be attributed to the fact of the low mortality rate among them particularly in 60-70 age groups. The elderly living alone is not only because of the care or abuses but also because they are poor and childless elderly. Irrespective of place of residence the large number of males is living with spouse and other family members. It is found that the about 38 per cent rural females and 46 urban females are living with their children whereas percentage for males is low. It indicates the care and responsibility of children towards their mothers (Table 1).

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Table 1: Haryana: Living Arrangement by Sex and Residence, 2004

Living	Rural		Urban	
	Male%	Female%	Male(%)	Female(%)
Alone	0	0.8	0	6.1
Spouse only	7.0	5.6	13.7	8.7
Spouse and other members	69.6	51.9	66.3	34.3
With Children	20.9	38.3	18.0	45.9
Other relation & non relations	2.3	3.4	1.3	1.7

Source: NSSO 60th Round: Jan-Jun 2004

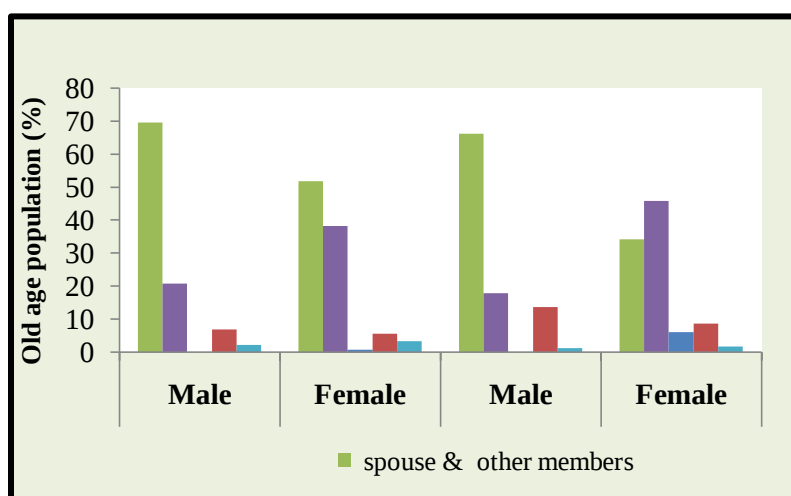


Fig.1 Haryana: Living Arrangements by Sex and Residence, 2004

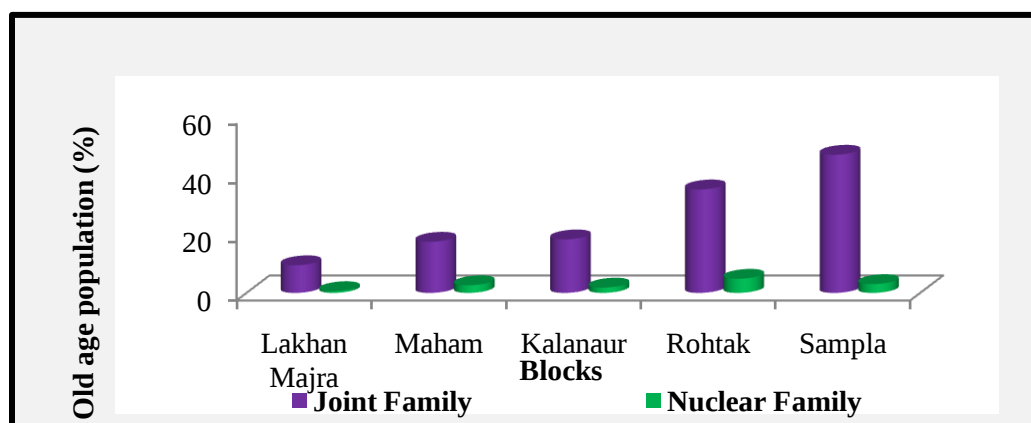
Case Study

For examining the living arrangements of elderly in the study area i.e. Rohtak, a household survey was conducted in 2012. Study at block level reveals that about 89.6 per cent elderly are living in joint family and the remaining in nuclear family (Table 3.2). The elderly living in nuclear family are those who are either poor or their children have moved away in search of jobs or they are childless. Elderly living in nuclear families due to abuse or any other such reason is negligible.

Table 2: Rohtak: Type of Living of Old Age, 2012

Block	Joint Family (in %)	Nuclear (in %)
Lakhan Majra	9.4	0.6
Maham	17.4	2.6
Kalanaur	18.2	1.8
Rohtak	35.2	4.8
Sampla	47	3
Total	89.6	10.4

Source: Based on field Survey-2012 Figures in parenthesis indicate percent



Source: Based on field survey-2012

Fig. 2: Type of Living of Elderly, 2012

The study area is close to Delhi and is witnessing rapid change in life style but still embraced their cultural values and practices. The traditional co-residential family living arrangement is the most common practice in Rohtak.

Insignificant numbers of cases are reported when the elderly are forced to live with other relations and non relations (Table 3.3). A majority of the elderly are co-residing. About 0.5 per cent elderly women due to widowhood are living alone whereas no elderly men live alone. The percentage of urban elderly women living alone is higher than rural elderly women. Marital status, particularly widowhood, as a determinant of living arrangement emerges is found an underlying factor. The percentage of females living with their children in urban areas is quite low because of the fact they are not ready to leave their place and relatives at this stage of life.

Table 3: Rohtak: Living Arrangement by Sex and Residence, 2012

Living	Rural		Urban	
	Male%	Female%	Male	Female
Alone	0	0.5	0	2.5
With Spouse only	15.0	25.6	17.35	17.45
With spouse and other members	73.4	67	76	74.8
With Children	10.4	7.65	6.40	5
With other relation and non relations	1.2	0.25	0.35	0.25

Source: Based on Field Survey-2012

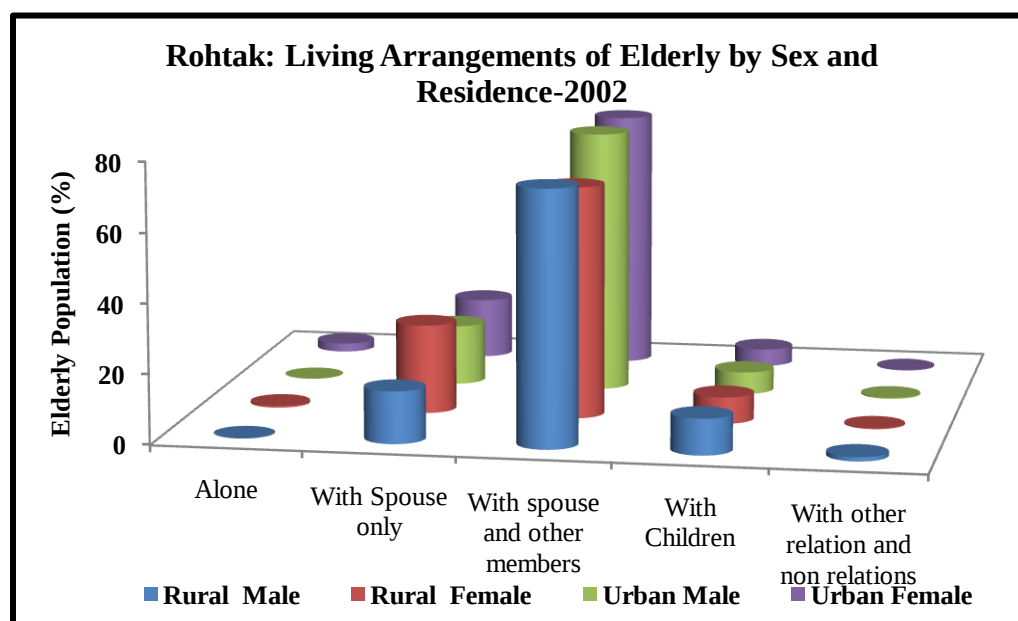


Fig. 3: Rohtak: Living Arrangement by Sex and Residence, 2012

It was found that the elderly people always prefer to stay with their spouse but widowhood, particularly among the women is a major issue. Such women confessed that they want to pass their remaining life in their native village as they feel comfortable in the traditional rural society. The men also wish to stay in the village because they are least willing to be dependent. The second choice of stay is with the sons. A good number of respondents agreed that though their sons' always insist to stay with him but only 65 males 70 per cent females agreed to stay with them but for short duration varying between 15 days to six months. It is also found that the elderly between 60-70 age group keen to stay with their sons in the cities but those beyond 70 years are least interested to leave their place. All those elderly who stayed with their sons had no

complaint except that of home sickness. As expected not a single elderly wished to live with their daughters after marriage. As the age of the elderly increases the care also increases. We did not find any elderly of 80+ ages living alone. The grand children have an important role in maintaining the dignity of the very old people. An important finding of the study is that in spite of financial hardship not a single poor is having a nuclear family. They live in close coordination reason being that they have nothing for dispute and to lose. The elderly were found to happy with their family. In contrast, the rich have some disputes/ disagreements with their children but still wish and live with them but with an upper hand.

CONCLUSIONS

In spite of high level of dependency the elderly in India, often live with relatives, and are valued, even revered, for their wisdom and experience. The study area i.e. Rohtak is traditional society and as such elderly cared well. About 90 per cent of them are living with their families. Those living in nuclear families are living at their will. There is no compulsion on the part of family particularly the sons. The most important finding is that the poor families in spite of financial and other problems are more supportive to their elders than the rich.

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Research and Its Concepts

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Keywords: *Research, Psychology*

INTRODUCTION:

The prefix 'Re' in the word 'research' according to the Concise Oxford Dictionary means 'Frequentative and Intensive'. Therefore only that category of investigation can properly be called 'Research' which

- i) Attempts to verify the data obtained through the study in a variety of ways and
- ii) Each verification should have exposed the data to a severe and intensive scrutiny

As such, according to me, "Research" means "a systematic, frequentative and intensive study of the data" (with a view to extend our knowledge)

The Sanskrit equivalents of the English word "Research" are as follows

- | | |
|-----------------------|--|
| i) Nirupana" i.e. | Ascertaining, determination |
| ii) Anvesana i.e. | Searching after (some hidden causes or relation of things) |
| iii) Anusandhana i.e. | Close inspection |
| iv) Vichrana i.e. | Reflection |
| v) Marganin | Investigation |
| vi) Jignasa | inquisitiveness |

Thus "Research" should mean investigation consisting of determination and inspection of, or reflection upon, facts with a view to determine, of search, something which may satisfy the curiosity of the investigator, and as a result of the same, carry his knowledge forward. This definition is also silent on the object of research although it is comprehensive enough to include almost all the aspects of-

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- the research method and also emphasize upon the subjective element (jignasa) which is responsible for it. However, beside jignasa, a research scholar should not only have an abundant fund of extraordinary will power and self discipline but also a fervor of a devoted youthful lower whose enthusiasm vaxes every day into fresh vigorous efforts.

However, it should be borne in mind that the knowledge so acquired should not have its validity limited only to the data under scrutiny but should have universality about it. That is to say, it should have a general applicability and relevance to a similar category of data anywhere. It should hold good or be applicants to the entire range of the same kind of phenomena.

This definition will make it clear that it is wrong to restrict the meaning of the word “Research” to laboratory work only which has for its method chiefly experimentation to manipulation of the data under controlled conditions. The restriction of the word “Research” to “laboratory investigation” only rests upon (i) the misconception of the scientific method of enquiry and (ii) the confusion of a method of scientific method. In fact any study can claim to be called scientific wherein data are subjected logical analysis regardless of the fact whether the result are obtained by experiment statistics or common sense. Even of the subject matter or data of any particular discipline does not admit of the possibility of experimentation to verify the data (i.e. geology, astronomy etc.) it cannot on that ground, and for that reason, be excluded from the preview of the scientific study, nor can such a study be prevented from being called scientific, if the data are obtained by and amenable to, a process of logical analysis which broadly consist of induction and deduction. Induction means particular to general and education mean general to particular.

Research work may broadly be divided into three categories (a) Physical Science Researches (b) Social Science Researches and (c) Literary Researches. But they all meet on the common ground of the Scientific method employed by them. In the physical sciences one does not variably begin with a clean slate. They required consultation with already written material , such as reports of other scientists, and in this respect, this type of research work takes part in the nature of researches in social sciences (such as history) and literary field. Similarly, although literary research belongs mainly to the field of creative work, the method adopted in this area of investigation is also same as that of historian who goes through a number of

ancient texts to verify any data or fact. Literary research lies in gathering and ordering concepts and information from published and unpublished sources relevant to the study of any other. Here the degrees and extent of diligence and caution expected to be used by the scholar are the same in other good scientific research work in the field of both physical and social science. The scholar has to collect fragments of information and checks them against other information obtained from other sources and also to scrutinize the varying degrees of reliability of these sources. Every scientific research work today in any of the three fields mentioned above uses all these methods in conjunction but in different degrees.

Another type of classification seeks to divide the research work in the (i) Pure and (ii) applied researches i.e, research work undertaken solely with the purpose of extending knowledge and research taken in hand with the intention of developing practical application of results. But such a distinction is rarely a clear one. Pure research sometimes turns out to possess unforeseen practical potentialities and the applied research also sometimes yields purely theoretical results. Actually except in physical sciences, the real distinction lies in attitude and pay rather than in the method of motives behind the research work. In fact, sooner this distinction is done away with the better the recognition of the irrelevance of the idea of acquisition of knowledge for its own sake as the ideal of research work in the field of social sciences and literature will emancipate the research activity in these fields from a great many handicapping factors.

Each organized investigation requires some subjective propulsion with some hypothesis or problem in mind a researcher proceeds to collect, select, evaluate and organize the data relevant to his studies and the rest he leaves untouched. If there is no such sense of direction or purpose, i.e. if no subjective element is present in his research work, he will not be in a position to make the necessary selection and elimination from the data, and without this process no research work is possible. The slogan “Research for research sake” or research for truth’s sake does not profile the subjective element so vitally necessary for any research activity.

Formerly research work was undertaken by an individual (a social) scholar who plunged deep into his studies to discover truth for its own sake. Today this concept of research is no longer valid because of the shift of emphasis from the rational to experimental or observational aspect, which presupposes corporate work. The increase in the complexities of data and the development of complicated

techniques require sharing of labour and information to a very large extent. Today research scholars work together in great centers of research financed by government, industrial organizations, universities or foundations. Here a large number of scholars belonging to different fields, applying different norms, employing to different techniques and seeking different ends are found working together at one place, helping others and being helped by others in ones field of specification. All of them are working here for satisfying some social demand. As the research work in history has the element of contemporary in it because it is an outcome of pressures, pulls and problems weighing upon society at a particular hour, the research work in physical sciences and literary fields are also products of tension, strain and requirements of a particular hour. All research work (in any field) is an outcome of individual reaction to social needs, even though he might not be conscious of it at times. Social needs should be aimed at through the satisfaction of individual desires.

There is great truth in the maximum that individuals often serve society unknowingly and research work is no exception to these rules.

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Sensory Integration Therapy on Social and Self Care Skills in Children with Autism

Megha Kukreti², Dr. Pooja varma²

ABSTRACT:

Autism is a lifelong neurological disability, usually appearing during the first three years of life, which severely impairs the person's sensory processing; verbal and nonverbal communication; and social interaction. Autism causes disturbance in Sensory processing which affects all areas of life like development, behaviour, learning, communication, friendships and play. The aim accentuates how Sensory Integration Therapy helps in improving the social and self care skills in children with autism (3-12 years of age). The findings reported that sensory integration therapy for three times a week for three months helps in improving some aspects of their social and self care skills. The present research provides an opportunity for further research on other types of adaptive behaviour.

Keywords: *Autism, Social skills, Self Care Skills, Sensory Integration Therapy.*

INTRODUCTION:

Autism is a lifelong neurological disability, usually appearing during the first three years of life, which severely impairs the person's sensory processing; verbal and nonverbal communication; and social interaction (APA, 2000).

Social skills are those skills which are developed so that the individuals behave according to the expectations of the society. It is developed through the child's relationship and interaction with the people.

Self care skills are components of basic activities of daily living which includes eating, toileting, bathing, dressing, grooming. Each component has its subcomponents and develops with age.

Sensory processing is the normal neurological processing process of organizing sensation for a person's everyday activity. We use sensations for our every day activity to function effectively and smoothly like academic skills, gravitational security, motor planning, postural stability etc. Our brain receives sensation through our body and surrounding; interpret it and send a response.

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Adaptive behaviour which is impaired in autism is referred to as everyday coping with environmental demands and includes the skills of daily living that people perform for self-care and relate to others.

The American Association on Mental Retardation (AAMR, 1992) emphasize 10 areas of adaptive behaviours Communication, Community Use, Functional Academics, Home Living, Health and Safety, Leisure, Self-Care, Self-Direction, Social and Work.

Sensory processing disorder (SPD), also called sensory integrative dysfunction, occurs when the brain is unable to process the sensory information efficiently. The person has difficulty in responding in an appropriate manner to everyday sensation; which others hardly notice or simply take few seconds like a child who is under responsive to touch does not feel pain and thus unable to recognise the threat for e.g., touching a warm utensil will burn his hands but due to under responsiveness he will not remove his hand from the warm utensil.

Another e.g., would be the problem in visual processing that will lead to omitting of words or numbers which will affect his academic skills and day to day functioning that requires the reading skills.

This idea is supported by many researches which say that SI occurs due to dynamic influence of sensory inputs occurring as early as in womb which forms the basis of more complex skills like language, emotion etc. Problems at the basic level lead to problems at the higher level. It is found that there is a high correlation between the sensory processing disorder and participation in daily functioning including play. (Bundy et al, 2007; Bra-Shalita et al, 2008; Williames et al, 2009).

SPD is a complex problem affecting all areas of life like development, behaviour, learning, communication, friendships and play. When SPD children try to meet the daily activity their responses may be ineffective and clumsy. Children find their own compensatory ways to deal with it. Mostly child needs assistance through: sensory integration- based occupational therapy (“OT/SI”).

Sensory Integration Therapy (SIT) is a technique of occupational therapy, which provides playful, meaningful activities that enhance an individual’s sensory intake and lead to more adaptive functioning in daily life. The emphasis is on improving sensory-motor processing rather than on skill training.

Occupational therapy treats the client by the use of purposeful activity to maximize the independence and the maintenance of health of an individual who is limited by a physical injury or illness, cognitive impairment, a psychosocial dysfunction, a mental illness, a developmental or learning disability, or an adverse environmental condition

From the Sensory Integration theory, the SIT has evolved whose basic idea is that if the sensory system is restored the day to day functioning of the person will also be achieved. The effectiveness of SIT is supported by the past researches and SI theory.

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It is indicated that improvement in sensory processing enhances participation in home, school, occupational and family activities, improvement in behaviour regulation, including increased engagement and decreased aggression, less need for intense teacher direction, and decreased mouthing of objects. It overall helps in restoring the sensory system and helps the child to participate more in the daily functioning and reduced self injurious behaviour. (Mason & Iwata, 1990, Robert et al, 2007, Schaaf et al., 2012; Pfeiffer et al, 2011, Schaaf & Nightlinger, 2007; Zimmer & Desch, 2012).

METHOD

The aim accentuates how Sensory Integration Therapy helps in improving some aspects of social and self care skills in children with autism.

Participants

The sample was confined to ten (3-12 years) according to convenience bases from Delhi and NCR. The regular follow-ups were administered for full three months. It was ensured that they were not receiving any other kind of therapy like speech therapy etc. and are not diagnosed with any other co-morbid disorder.

HYPOTHESES

- There will be a significant difference in some aspects of social skills within the time frame.
- There will be a significant difference in some aspects of self care skills within the time frame.

TOOL: Goal Attainment Scale (GAS)

GAS was first developed by Kiresuk and Sherman in 1968. Though old but it provides an excellent individualized, criterion referenced results. It helps in evaluating the functional goals. This approach helps in seeing the extent to which individual goals are achieved. It is used in various fields like rehabilitation, medicine, nursing, social work etc. Goals are formed by the collaboration of client, client family and therapist. Goals formed are specific, measurable, attainable, realistic and timely. It involves defining a unique set of goals for the client who is rated in a scale of 5 ranging from -2 to +2 (-2: much less than expected outcome; -1: less than expected outcome; 0: expected outcome; +1: greater than expected outcome; +2: much greater than expected outcome). Criterion reliability is .60. Reliability is based on the therapist judgement about the impact of intervention, the client present condition and can be increased by involving experienced therapist, training to the therapist about the scale. Inter-rater validity is

.88. Validity can be increase by measuring that provides more defensible estimates of post treatment status and employ randomly selected control groups.

Data analysis

After acknowledging informed consent from parents, a functional assessment was done through the parental interview and observation to know the baseline of the children social and self care skills. According to the baseline, goals were set for the children to achieve in 3 months period which was assigned a rating of -2 to +2. -2 being the less than what is expected, 0 being what is expected and +2 being more favourable than expected. After the assessment was done, the children were given intensive sensory integration therapy i.e. 3 times a week for 3 months. After the 3 months, again functional assessment was done to rate the predetermined goals. The ratings were converted into overall GAS formula to get a standardised score, was further analysed using Wilcoxon's Signed Rank Test to ascertain any positive difference in the social and self care skills after 3 months of sensory integration therapy.

RESULTS

Social and Self Care Skills

The values of mean rank, sum of rank, Z and significant level for the data is summarised in the table below:

Table 1: Mean Rank of Social and self care skills

I. Social Skills	N	MEAN RANK	SUM OF RANK
Negative ranks	0	.00	.00
Positive ranks	10	5.50	55.0
II. Self Care Skills	N	MEAN RANK	SUM OF RANK
Negative ranks	0	.00	.00
Positive ranks	10	5.50	55.0

Using a Wilcoxon Signed Rank Test on the data ($Z = 2.829$, $Z = -2.823$; $N = 10$), the results were found to be significant at $p < .005$ level for a one tailed test. This suggests that sensory integration therapy helps in improving the social and self care skills of autistic children.

DISCUSSION

Sensory Integration theory has given birth to Sensory Integration Therapy whose basic idea rest on the fact that if the sensory system is restored, the day to day functioning of the person will also be achieved. It is indicated that improvement in sensory processing enhances participation in

home, school, occupational and family activities. Further it is found that SIT is increasingly used by Occupational therapist for children with developmental and behavioural disorders. (Schaaf et al, 2012; Schaaf & Nightlinger, 2007; Zimmer & Desch, 2012).

The social skills which are targeted in the present research are increase in eye contact, decreased undesired behaviour, more interaction with family members / friends, telling own needs, sitting for more duration of time. The results are evidence of the efficacy of sensory integration therapy in improving adaptive behaviour in children. There is improvement seen in some areas of social interaction, approach to new activities, response to holding or hugging and response to movement, decreases in the frequency and duration of self stimulating and disruptive behaviours (e.g., high activity levels, aggressive behaviours); and increase in functional behaviours, such as spontaneous speech, purposeful play, and attention to activities and conversation. (Ayres & Mailloux, 1983; Linderman & Stewart, 1999; Mason & Iwata, 1990; Smith and Bryan, 1999; Smith et al, 2005).

The self- care skills which are somewhat improved by the sensory integration therapy was eating: eating different texture food, eating with hands, putting water in glass and drinking it; then dressing: donning and doffing of socks/pants, put on - remove shoes, wearing caps/ socks and grooming: identifying his own brush, allowing hair cut/nail cut, washing hands, combing hair. The results are supported by past researches that indicated there was a significant change in sensorimotor skills, motor planning, reading related skills, and gross motor skills after receiving SIT program (Benson & Koomar, 2010; Pfeiffer et al., 2011).

Self care skills are improved as the touch sensitivity is decreased which allows the child to explore the world like touching different texture food/clothes, allowing hair cut/nail cut.

CONCLUSION

Autism impairs the sensory processing and affects the adaptive behavior of the child. Children avoids eye contact, dislike physical contact, treat people as objects, have no interest/understanding of other people feelings/emotions, never points out things of interest to others – simply stand close to something they want, lack of reciprocity, impaired empathy, unable to understand ‘social rules’, show little reaction to pain, shows no distress when separated from parents. On the other hand, there are some activities of daily living which a child is expected to fulfil according to his age for example, eating, bathing,, toileting, dressing and grooming which are usually developed till the age of 5 years. Though undoubtedly there are various effective interventions available but the therapy which works on the sensational aspect is sensory integration therapy. Our brain receives sensation (i.e, tactile, vestibular and proprioceptive sense) through our body and surroundings; interprets it and sends a response. The emphasis in therapy is on improving sensory-motor processing rather than on skill training by the use of purposeful activity to maximize the independence and maintenance of health of an individual who is limited by a physical injury or illness, cognitive impairment, a psychosocial

dysfunction, a mental illness, a developmental or learning disability, or an adverse environmental condition.

In the present research, Intensive Sensory integration therapy i.e. three times a week for three months with regular follow-ups with parents was found to be conducive in improving some aspects of social and self care skills of children with autism under 3 - 12 years of age with repeated rehearsal.

After completion of the task, every researcher is struck with the feeling of some shortcomings i.e., of a small sample. The reason of choosing small sample was the individual attention planned and activities to be rehearsed with each child, simultaneously taking into account the parent's understanding and dedication towards improvement so to reduce absence of the child in the class. In addition a motivational class was also being conducted for parents to help their child in completing the homework assignments. Secondly, few components of adaptive behaviour were accentuated to put less demand on child. Then in the clinical setting, it is crucial to match the uniformity of all subjects in various aspects of day to day functioning. Some children were new to this therapy, therefore little more time was devoted to them as compared to few subjects who somewhat started with the therapy weeks before. In future, further studies in this area can be planned in order to expand the horizon including other components of adaptive skills, increasing the time frame of implementing modality. Moreover, if used with other treatment modalities whose effectiveness cannot be negated in order for improvement in the day to day emotional, social and behavioural functioning of the child.

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Job Satisfaction and Occupational Stress among Public and Private Bank Employees

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ABSTRACT:

This article discusses the emerging research concerned with the effect job satisfaction on occupational stress experienced among bank employees. The Occupational Stress Index developed by A.K. Srivastava and A. P. Singh (1984) and Job Satisfaction scale (JSS) developed by Dr. Amar Singh and Dr. T R Sharma (2007) by the researchers to importune information from bank employees was administered to 100 respondents comprising of both public and private banks in the branches of SBI, Bank of Baroda, Punjab National Bank, Co-Operative Bank, ICICI, HDFC and Axis Bank within Ahmedabad city. Objectives of the studies are 1) To study the level of Job Satisfaction of Employees working in Private and Public bank in relation to types of Bank and Gender. 2) To study the Occupational Stress of Employees working in Private and Public bank in relation to types of Bank and Gender. 3) To know the correlation between Job Satisfaction and Occupational Stress of Private and public Bank employees. Statistical 't'-test and correlation were used for data analysis. The findings of the study reflect that Public Bank employees are more satisfied with their jobs and occupationally less stressed than the Private bank employees. Further Female bank employees are less satisfied and under higher level of occupational stress as compared to their Male bank employees counterparts. Whereas, there is a negative & significant co-relation between Job Satisfaction & Occupational stress of Bank employees. It is suggested from findings of the study, that in order to reduce occupational stress among Private bank employees, the job satisfaction must be enhanced.

Keywords: *occupational stress, job satisfaction, Public and Private Banks and Gender.*

INTRODUCTION:

India is a vast country. It is peculiar for its unique nature in its diverse culture and atmosphere. India's diversity is visible in its social and economic set up. Banks plays a vital role in the country's economy. Our banking system has witnessed various alterations and policy modifications which have revolutionaries the present day banking scenario. These modifications have laid strong foundation for the current level improvised banking solutions. In every organizations, employees are facing increasing pressures in trying to be effective at work.

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Modern business demands high quality performance, short response times, long working hours and heavy workloads. When an employee has a problem, whether the origin is work, performance in the work place is likely to be affected. It makes sense, therefore, to take the best care of employees and their psychological needs.

Job satisfaction is defined as all the feelings that an individual has about his/her job (Sowmya and Panchanatham, 2011). Job satisfaction is associated with increased output, efficiency of the organization, loyalty with the organization, and reduced absenteeism and earnings (Ellickson & Logsdon, 2001; Wright & Davis, 2003), however, if employees are not satisfied with the job then it may cause turnover intentions, increasing costs, decreasing profits and ultimately customer unhappiness with the organization (Zeffane et al., 2008). Over years, an attempt has been made to categorize and find out the factors that affect job satisfaction and found wages as the main factor for job satisfaction, but other factors such as the promotion, recognition of work, and employees loyalty are also considered important (as cited in Salem et al., 2013). Nevertheless, Calisir et al., (2010) asserts that salaries and incentives are the most important determinant of job satisfaction. Job satisfaction is an attitude or emotional response to work task as well as to the physical and social conditions of the work place and Job Stress is one of the determinants which may affect the job satisfaction of an employee (Jagtap & Yadav, 2014). Stress causes a reduction in the effectiveness of the organisation, high desertion rates, low morale, and low job satisfaction (Jimmieseon, Terry & Callan, 2004). In occupational stress model, it was found that job stress and job satisfaction are distinct, but highly interrelated variables. According to Seaward's (2005) findings, the ability of employees to properly control and manage their job stress will lead to have higher job satisfaction.

Occupational stress occurs in situations in which discrepancies exist between occupational demands and opportunities on the one hand and the workers capacities needs and expectations on the other hand. Occupational stress is a stress reaction, which is both physiological, and psychological. In present times it has been strongly felt that teaching has become a very stressful profession. For Employees the sources of stress are generally the heavy workload, time pressure, poor working environment, time pressure, lack of recognition for work, delayed salaries, etc. Stress up to moderate level is helpful for the motivation but stress above the moderate level affects the physical and mental wellbeing of the Employees.

The present paper aims to delve deeper to explore the mean differences and co-relationship exist between job satisfaction and occupational stress amongst public and private bank employees.

REVIEW OF LITERATURE

Sattar and Ali (2014) measures the factors affecting the employee satisfaction by discussing variables such as promotion, work environment, leadership and job satisfaction and observe its impact on workers of the banking industry at Bahawalpur district. It was determined that all the

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variables promotions, work environment, leadership behaviour and job satisfaction have significant relationship with employees job satisfaction.

Salem et al., (2013), concludes that most people or employees agreed that personality type suits the work they do, and have the opportunity to do what they do best and they are also optimistic about their personal and professional life and further demonstrates that fair policy of recruitment and selection leads to employee satisfaction at work.

Presence of higher degree of occupational stress adversely affected the level of job satisfaction and if employees are allotted low burden of tasks, targets and operational activities to perform for their customers than they'll become more calm, happy and satisfied with their jobs instead of having hectic workload, burden and tension created by the line managers as well as customers (Khan, Ramzan & Butt, 2013).

After extensive literature review, Sowmya and Panchanatham (2011) reveals that job satisfaction is dependent on supervisor behavior, coworker behaviour, pay and promotion, job and working condition and organizational aspects. In the case of job satisfaction aspects, commercial banks employee perceived pay and promotion as an indispensable factor to decide their satisfaction level.

The level of employees' job satisfaction increases by many factors and when employees are satisfied with their work, they feel motivated (Noor, 2011). The demand of employees work life balance is increased by change in trends in the business such as change in organizations structure, diversity of work force and female employees working in organizations. Organizations should provide work life balance facilities to their employees so that employees can perform their duties effectively and leads organization to the success.

Kamal and Debashish (2009) found that with the change of satisfaction determinants, level of job satisfaction also varies. They observed that as a person ages, his job satisfaction shows an increasing trend. With age, spiritualism of the person increases, but his alternatives for change decreases. Younger employees have more energy, more expectations and more options, and hence have lesser satisfaction with the job.

OBJECTIVES :

The Objectives of the study are stated as follows

1. To study the level of Job Satisfaction of employees working in public bank and private bank in relation to types of Bank and Gender.
2. To study the Occupational Stress of employees working in public bank and private bank in relation to types of Bank and Gender.
3. To know the correlation between Job Satisfaction and Occupational Stress of Public bank and Private bank employees.

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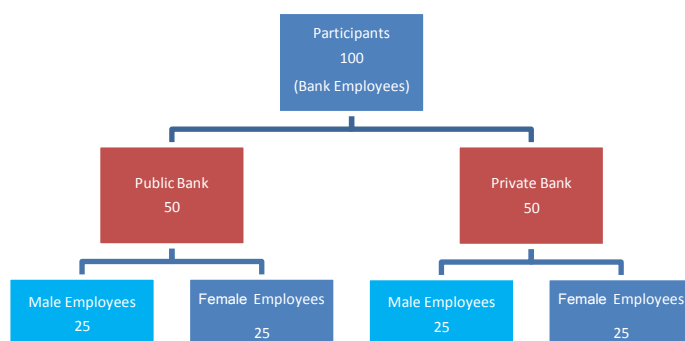
HYPOTHESIS :

1. There is no significant difference between public bank and private bank employees in respect of their job satisfaction.
2. There is no significant difference between public bank and private bank employees in respect of their occupational stress.
3. There is no significant difference between Male and Female bank employees in respect of their job satisfaction.
4. There is no significant difference between Male and Female bank employees in respect of their occupational stress.
5. There is no significant relationship between job satisfaction and occupational stress.

METHODOLOGY

Participant:

A sample of 100 Employees was randomly selected from Public banks and Private banks (50 were Public bank employees and 50 Private bank employees) of Ahmedabad city of Gujarat.



Variables Involved :

In the present study, job satisfaction and occupational stress have been taken as the dependent variables, whereas demographic variables such as types of Bank, Gender constituted the independent variables.

No.	Variable	Type of variable	Level	Name of the level
1	Types of Bank	Independent	2	Public Bank, Private Bank
2	Gender	Independent	2	Male, Female
3	Job Satisfaction	Dependent	1	Score of Job Satisfaction Scale
4	Occupational Stress	Dependent	1	Score of Occupational Stress Index

Tools of the study:

Occupational stress was assessed using “**Occupational Stress Index OSI**” (Srivastava and Singh, 1984). The questionnaire is consisted of 46 statements with five alternative responses e.g., 5 for strongly agree, 4 for mildly agree 3 agree, 2 for disagree and 1 for strongly disagree. Responses were obtained on a summated rating scale format ranging from “strongly agree” to “strongly disagree”. Total score on this scale is considered for the assessment of occupational stress. Higher scores indicated higher perceived occupational stress or more the score on this scale indicates more stress.

The **job satisfaction scale (JSS)** developed by Singh & Sharma (2007) will be used to measure job satisfaction among the sample Bank Employees. The scale has a very wide acceptance in measuring psychological aspects of functioning in any profession. It consisted of 80 statements in the pilot study. After try out only 30 statements were retained in the final. The scale has been standardized on engineers, doctors and teachers. The test retest reliability of the scale works out to be .978.

RESULTS AND DISCUSSION:

To find the meaningful interpretation of the raw scores, the data is analysed using Mean, S.D and ‘t’-test.

Ho1. There is no significant difference between public bank and private bank employees in respect of their job satisfaction.

Table-1: Mean, SD and ‘t’ value of job satisfaction scores of Public Bank Employees and Private Bank Employees.

Types of Bank	Job satisfaction			‘t’
	N	M	SD	
Public Bank	50	78.02	4.60	8.27**
Private Bank	50	67.78	7.45	

***Significant at .01 levels. (2.63)**

Table no.1 the ‘t’ test has been applied to find out whether there is any significant difference in the job satisfaction with respects to their Bank types. The calculated ‘t’ value is found to be 8.27 which is greater than the table value and significant at 0.01 level. Hence the Null Hypothesis “There is no significant difference between public bank and private bank

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employees in respect of their job satisfaction” is rejected. Therefore it is concluded that there is a significant difference between public bank and private bank employees in the job satisfaction. This result indicates that the mean scores for the variable of job satisfaction for Public Bank Employees were 78.02 and Private Bank Employees were 67.78 respectively. The mean value indicates that the Public Bank Employees scored better than the Private Bank Employees in the job satisfaction. It means that the Public Bank Employees were more satisfied with their job than the Private Bank Employees. The main reasons for job dissatisfaction in Private bank were job insecurity, salary not at par with experience, not much value or credit was given for the tasks accomplished and monotonous nature of job.

Ho2. There is no significant difference between public bank and private bank employees in respect of their occupational stress.

Table-2: Mean, SD and t value of occupational stress scores of Public Bank Employees and Private Bank Employees.

Types of Bank	Occupational stress			‘t’
	N	M	SD	
Public Bank	50	101.68	16.15	5.05*
Private Bank	50	118.94	17.98	

***Significant at .01 levels. (2.63)**

The table no.2 indicates the significant difference between the Public Bank Employees and Private Bank Employees in respect of their level of occupational stress. The table no.2 indicates that the Private Bank Employees have high mean score (118.94) in relation to occupational stress compared to Public Bank Employees (101.68) in this particular research. The t-value was 5.05, significant at 0.01 level of confidence. The mean score was higher for private sector bank employees indicating that private bank employees have high occupational stress than public bank employees.

The results of the present study are in agreement with the findings of research studies conducted by Sadat Ali, Al-Habdan and Shriyan (2005) and Kumar (2008). Their findings revealed significant difference in the level of occupational stress between Public and Private bank employees. The employees working in Public Banks were found to fare better than those in Private Banks. The possible reason for the present findings could be that the employees working in Private Banks have longer working hours as compared to their counterparts working in Public Banks. Private bank employees undergo high occupational stress as they work in late nights,

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conduct more market oriented activities than public bank employees and also they are driven by targets.

The finding of the present study would provide useful insight to policy makers in public and Private Banks. The findings can help them to take suitable measures and actions to help employees to distress them which can help in increasing output and employees stability in their respective banks.

Ho3 There is no significant difference between Male and Female bank employees in respect of their job satisfaction.

Table-3: Mean, SD and t value of job satisfaction scores of Male and Female Bank Employees.

Gender	Job satisfaction			‘t’
	N	M	SD	
Male Bank Employees	50	74.54	5.70	2.07**
Female Bank Employees	50	71.26	9.61	

****Significant at .05 levels. (1.98)**

Table no.3 the ‘t’ test has been applied to find out whether there is any significant difference in the job satisfaction with respects to their Gender. The calculated ‘t’ value is found to be 2.07 which is greater than the table value and significant at 0.05 level. Hence the Null Hypothesis “There is no significant difference between Male and Female bank employees in respect of their job satisfaction” is rejected. Therefore it is concluded that there is a significant difference between Male and Female bank employees in the job satisfaction. This result indicates that the mean scores for the variable of job satisfaction for Male Bank Employees were 74.54 and Female Bank Employees were 71.26 respectively. The mean value indicates that the Male Bank Employees scored better than the Female Bank Employees in the job satisfaction. It means that the Male Bank Employees were more satisfied with their job than the Female Bank Employees.

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Ho4 - There is no significant difference between Male and Female bank employees in respect of their occupational stress.

Table-4: Mean, SD and ‘t’ value of occupational stress scores of Male and Female Bank Employees

Gender	Occupational stress			‘t’
	N	M	SD	
Male Bank Employees	50	104.54	23.92	3.16*
Female Bank Employees	50	116.08	9.78	

***Significant at .01 levels. (2.63)**

The table no.4 indicates the significant difference between the Male and Female Bank Employees in their level of occupational stress. The calculated ‘t’ - value is found to be 3.16, which is greater than the table value and significant at 0.01 level. Hence the Null Hypothesis “There is no significant difference between Male and Female bank employees in respect of their Occupational Stress” is rejected. Therefore it is concluded that there is a significant difference between Male and Female bank employees in the Occupational Stress. This result indicates that the Female Bank Employees have high mean score (116.08) in relation to occupational stress compared to Male Bank Employees (104.54) in this particular research. This shows Female Bank Employees high level occupational stress compared to Male Bank Employees.

Ho5 - There is no significant relationship between job satisfaction and occupational stress.

Table – 5: Showing the Correlation between job satisfaction and occupational stress

Sr. No.	Variables	N	Mean	‘r’ value
1	Job Satisfaction	100	72.90	-0.225**
2	Occupational stress	100	110.31	

****Significant at 0.05 level.**

As evident from Table 5, the coefficient of correlation (r) between job satisfaction and occupational stress of Bank Employees for the total sample (N=100) studied were negative and significant at 0.05 level. Therefore, the two variables are functionally related i.e., the variables exhibit a relationship thereby indicating that any increase in occupational stress will be attended

by a corresponding decrease in job satisfaction and vice versa. This indicates that occupational stress does have negative impact on the job satisfaction of Bank Employees. Hence, hypothesis 5 is rejected.

SUMMARY OF THE FINDINGS

- Public Bank Employees and Private Bank Employees differ significantly in their job satisfaction. Public Bank Employees have high level of job satisfaction than Private Bank Employees.
- Public Bank Employees and Private Bank Employees differ significantly in their occupational stress. Private Bank Employees have high level of occupational stress than Public Bank Employees.
- Male and Female Bank Employees differ significantly in their job satisfaction. Male Bank Employees have high level of job satisfaction than Female Bank Employees.
- Male and Female Bank Employees differ significantly in their occupational stress. Female Bank Employees have high level of occupational stress than Male Bank Employees.
- Negative and Significant Correlation between job satisfaction and occupational stress of Bank Employees

CONCLUSION

In this research, the investigator has studied about the job satisfaction and occupational stress among Public and Private Bank Employees. Human beings have various biological, psychological and social needs, when these needs are not promptly and easily satisfied by them, an individual faces a condition of stress. It may be said that some drastic changes need to be made with regard to the Banking profession. So the work load of Employees may reduce. A good Employee should have commitment to Clients, Co-workers, society and Bank management. Higher pay packages and perks and less rigidity along with improved work atmosphere so that the younger generation starts considering Banking profession as a serious option.

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Impact of Spiritual Practices on Well-Being among Madarsa and University Students

Mohd. Ahamar Khan¹

ABSTRACT:

The purpose of this study was to find out the impact of spiritual practices on wellbeing among Madarsa and University students. The sample consisted of 100 (n=50 Madarsa and n=50 University students) participants. Spiritual Practices Scale (M) and Well Being Scale, was used to collect the data. Simple Linear Regression, Correlation and t-test were used for data analyses. The findings of this study revealed that, there is positive and significant influence of spiritual practices on overall wellbeing of students. There was also significant influence of spiritual practices on wellbeing of Madarsa as well as University students. Further t-test was applied and significant difference was found between spiritual practices as well as wellbeing of Madarsa and University students. This study has good significance in practical life; it could serve as a guide to increase student's spiritual practices to maximize wellbeing.

Keywords: *Spiritual practices, Wellbeing, Madarsa and University Students.*

INTRODUCTION:

Every person is born with their own spirit in the world. So, spirituality is essential part of each and every person's lives around the world. Spirituality can be developed by the spiritual practices among the people. Those people who regularly involve such types of spiritual practices, they experience its extra-ordinary effects. Although, the forms of spiritual practices may vary across the culture and religion, but it is universally prevalent. Due to the variation of spiritual practices, researcher made an idea to see the influence of Islamic spiritual practices on well-being. For this purpose, this study was carried out on Madarsa and University students. Because of Madarsa and University educational environment are quite different in terms of spiritual practices. Madarsa educational environment fully based on Islamic spiritual practices, while University educational system does not comprises with spiritual practices.

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Spirituality

Elkins and others (1988) propounded a humanistic definition of spirituality. According to them, “spirituality is a way of being and experiencing that comes about through awareness of a transcendent dimension and that is characterized by certain identifiable values in regard to self, others, nature, life and whatever one considers to be the ultimate”. Vrinte (1996), defined spirituality as ‘it is inspired and sustained by transpersonal experiences that originate in the deepest recesses of the human being and they are but natural modifications of that domain of the human psyche and that contains greater depth of life’. Perrin (2007) proposed spirituality in terms of spirit. According to him, the spirit refers to human consciousness, a constitutive dimension of human beings, and to capacity for self consciousness. Kabbani (2008) argued spirituality as a powerful weapon. He said it a struggle between acceptance and non acceptance, belief or unbelief. Burkhardt (2007) suggest that “trying to define spirituality is akin to trying to lasso the wind. The wind is sensed and felt, and its effect on us and things around us is seen, but it cannot be contained within imposed boundaries, or even the best definitions”.

Kuhalampi (2010) listed the following features of spirituality.

- Meaning the ontological significance of life; making sense of life situations; deriving purpose in existence.
- Value beliefs and standards that are cherished; having to do with the truth, beauty, worth of a thought, object or behaviour; often discussed as ultimate values.
- Transcendence experience and appreciation of a dimension beyond the self; expanding self –boundaries.
- Connecting relationship with self, others, God, and the environment.
- Becoming an unfolding of life that demands reflection and experience; including a sense of who one is and how one knows.
- Hope a prospect of confidence and trust towards the future.

Dimensions of Spirituality

Spirituality is better understood as a multidimensional space in which every individual can be located (Larson, Sawyers & McCullough, 1998). Sims (1994) propounded five dimensions viz., meaning in life, interrelatedness, wholeness, morality, and awareness of God.

Glock and Stark (1965) proposed four elements or domains all of which are related with the context of religion: the experiential, the ritualistic, the intellectual and the consequential. Capps and others (1976) identified six spiritual dimensions within religion; the mythological, ritual, experiential, dispositional, social and directional. Elkins et al (1988) offered nine core dimensions of spirituality: transcendent, meaning and purpose in life, mission in life, sacredness of life, material values, altruism, idealism, and awareness of the tragic and the fruits of spirituality. Karasu (1999) suggested the three ways to spirituality in the context of belief: belief in the sacred, belief in unity and belief in transformation.

Miller and Thorensen (2000) propounded three broad measurement domains; spiritual practices, beliefs and experiences. These three domains are meant to characterize spirituality within and outside the context of religion and are consistent with a psychological perspective that is sensitive to cultural, ethnic, socio-economic and religious differences.

Spiritual Practices

Spiritual practices may be observed easily because it focuses attention on overt observable behaviour (e.g. Connors, Tongon & Miller, 1996). Ibn ‘Arabi’ categorised four stages of practice in Sufism namely; Sharia (exoteric religious law), Tariqa (the mystical path), Haqiqah (truth), and Marifa (gnosis) (Ozak, 1988). People engage in various types of spiritual practices such as prayer, meditation, fasting, visiting Holy shrines, attending religious congregation, charity, and pilgrimage. Religion and spirituality are traditional means of coping, as they promote an internal locus of control in stressful situations (Barbarin, 1993; Hefti, 2011). **According to the Allport, ‘I feel equally sure that mental health facilitated by an intrinsic, but not an extrinsic, religious orientation’.** Loewenthal et al. (2001) conducted a study on depressed people among Christians, Jews, Muslims, Hindus, followers of other religions and non-religious people living in the UK and found that Muslims believed more strongly than as compare to other faith groups in the efficacy of every form of religious activity in coping with depression.

Well-being

World Health Organization (WHO, 1952) defined optimal health as “a state of complete physical mental and social well-being and not merely the absence of disease or infirmity.” They also summed spiritual well-being as one dimension of well-being. Archer and Gage (1987) defined well-being as the “Process and state of quest for maximum human functioning that involves the body, mind and spirit.”

The Oxford English Dictionary (Simpson and Weiner, 1989) defined well-being as, “A state of being or doing well in life, happy, healthy or prosperous condition; moral or physical welfare”. According to Singh (1999), well-being covers all aspects of health namely: physical, mental,

social, emotional and spiritual. Schneiders (1965) proposed mental well-being as follows: (1) Mental efficiency ; (2) Control and integration of motives; (3) Control of conflicts and frustrations; (4) Positive and healthy feelings and emotions; (5) Tranquility of peace of mind; (6) Healthy attitudes; (7) Healthy self concepts; (8) Adequate ego identity; (9) Adequate relation to reality. Myers(1992) conceptualized spiritual well-being as “ a continuous search for meaning and purpose in life, appreciation for depth of life, the expanse of universe and natural forces which operate a personal belief system.”

LITERATURE REVIEW

Myers and Diener (1995) in a random survey had done in a sixteen nations and found that religious involvement is associated with higher well-being, optimism, and positive expectations for the future. Lee and Ishii-Kuntz (1987) in a survey among 2,872 those persons whose age was 55 or over on social interaction, loneliness and well being among men and found that religious attendance was significantly and positively related with morale ($p=.02$), after controlling for ten other variables, including all the social variables.

Helm et al. (2000) had studied the effect of prayer on mortality and found an association between private religious activity and longer survival in certain population subgroups. Daniels and Harris (2000), in their study found the strongest relation between well-being and performance. Various investigators have deeply investigated the impact of personality on well-being, and found that the strongest and most dependable factor underlying differences in well-being between persons (Tellegen, David, Thomas, Kimerly, Nancy and Stephen 1988; Hayes and Joseph 2003).

Radcliff (2001) found that the ideological complexion of governments and levels of well-being are positively related to each other. He also shows a positive correlation between qualitative features of the welfare state well-being. Hellgren and Sverke(2001) found that the variables such as age, gender, education, work, family status, and tenure in organization influence to well-being.

OBJECTIVES OF THE STUDY:

- To determine the influence of spiritual practices on well-being among overall students.
- To determine the influence of spiritual practices on well-being among Madarsa students.
- To determine the influence of spiritual practices on well-being among University students.
- To determine the difference between Madarsa and University students on spiritual practices and well-being.

HYPOTHESES OF THE STUDY:

- There will be significant influence of spiritual practices on well-being among overall students.
- There will be significant influence of spiritual practices on well-being among Madarsa students.
- There will be significant influence of spiritual practices on well-being among University students.
- There will be significant difference between Madarsa and University students on spiritual practices and well-being.

Sample of the Study

In the present study sample was consisted of 100 Muslim male students (age 18 to 25), 50 each from Aligarh Muslim University and different Madarsas of Aligarh. The data was collected by simple random sampling technique.

Tools Used

In psychological researches, psychological tools play very important role especially with regard to the reliability and validity of the tools. The two different scales namely; Spiritual Practices Scale (Muslim) and Well-Being Scale, were used for data collection. The brief description of the scales used in the present investigation is presented in the following manner.

Spiritual Practices Scale (Muslim)

This scale was developed by Husain and Singh (2014). This scale consists of fourteen items. Minimum and maximum score ranges between 14 to 64. The internal consistency reliability of this scale was found to be 0.67. The construct validity of this scale was found to be 0.53. The content validity of this scale has also been found quite satisfactory.

Well Being Scale

This scale was developed by Singh and Gupta (2001). This scale consisted of five sub-scale namely; physical wellbeing, mental well being, social well being, emotional well being and spiritual well being. Each sub-scale has ten items and there are 50 items in total. Scores on all the sub-scale added up to get a composite score as total well being. Minimum and maximum score can be 50 and 250 respectively. It consists of 29 positive items and 21 negative items. The test-retest reliability of the scale was 0.98 and split half reliability was found 0.96. Content and concurrent validity of the Well being Scale was found to be well established. Concurrent validity of the scores of well being scale was determined by comparing it with the scores of Subjective Well being Inventory Sall and Nagpal (1992).

Procedure of Data Collection

Good rapport was established with participants before requesting to fill up the questionnaire and then instructions were invariably explained to the participants. After that questionnaires were distributed individually. Subjects were assured of confidentiality of their responses and were requested to extend their co-operation. Finally questionnaires were collected from all the participants, scoring done and analysis was carried on.

STATISTICAL ANALYSES AND RESULTS

Table-1: Represent Simple Linear Regression analysis, Spiritual Practices as predictor of Well-being among Overall Students.

Model Summary

Model	R	R Square	Adjusted R Square	Change Statistics R Square change
1	.818 ^a	.668	.662	.668

a. Predictors: (Constant), Spiritual Practices overall

The above table shows the model summary indicating one predictor (spiritual practices) of the model, in which correlation between spiritual practices and well-being was found to be $R=.818$. Further R square change was found to be .668 which represents the 66.8% actual contribution of predictor variable (spiritual practices) to criterion variable (well-being).

Table-2: Showing the Coefficient details of Spiritual Practices and Well-being of Overall Students (N=100).

Coefficients^a

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	145.935	25.655		5.688	.000
	Spiritual Practices Overall	2.472	.251	.818	9.837	.000

a. Dependent Variable: Wellbeing Overall

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The above table indicates that the value of $\beta=.818$ shows the spiritual practices positively related with well-being of overall students. The t-value found to be 9.837, which was significant at 0.01 level for spiritual practices. Thus, the first underlined hypothesis of the present investigation that (“there will be significant influence of spiritual practices on well-being among overall students”) is proved.

Table-3: Represent Simple Linear Regression analysis, Spiritual Practices as predictor of Well-being among Madarsa Students.

Model Summary

Model	R	R Square	Adjusted Square	Change Statistics R Square change
1	.973a	.947	.946	.947

a. Predictors: (Constant), Spiritual Practices Madarsa

The above table shows the model summary indicating one predictor (spiritual practices) of the model, in which correlation between spiritual practices and well-being was found to be $R=.973$. Further R square change was found to be .947 which represents the 94.7% actual contribution of predictor variable (spiritual practices) to criterion variable (well-being).

Table-4: Showing the Coefficient details of Spiritual Practices and Well-being of Madarsa Students (N=50).

Coefficients^a

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	-94.656	10.717		-8.832	.000
	Spiritual Practices	5.476	.188	.973	29.190	.000
	Madarsa Total					

a. Dependent Variable: Well-Being Madarsa

The above table indicates that the value of $\beta=.973$ shows the spiritual practices positively related with well-being of overall students. The t-value found to be 29.190, which was significant at 0.01 level for spiritual practices. Thus, the second underlined hypothesis of the present

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investigation that (“there will be significant influence of spiritual practices on well-being among Madarsa students”) is proved.

Table-5: Represent Simple Linear Regression analysis, Spiritual Practices as predictor of Well-being among University Students.

Model Summary

Model	R	R Square	Adjusted R Square	Change Statistics R Square change
1	.947 ^a	.897	.895	.897

a. Predictors: (Constant), Spiritual Practices University

The above table shows the model summary indicating one predictor (spiritual practices) of the model, in which correlation between spiritual practices and well-being was found to be $R=.947$. Further R square change was found to be .897 which represents the 89.7% actual contribution of predictor variable (spiritual practices) to criterion variable (well-being).

Table-6: Showing the Coefficient details of Spiritual Practices and Well-being of University Students (N=50).

Coefficients^a

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	83.402	4.739		17.598	.000
	Spiritual Practices	2.141	.105	.947	20.418	.000
	University Total					

a. Dependent Variable: Wellbeing University

The above table indicates that the value of $\beta=.947$ shows the spiritual practices positively related with well-being of University students. The t-value found to be 20.418, which was significant at 0.01level for spiritual practices. Thus, the third underlined hypothesis of the present investigation

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that (“there will be significant influence of spiritual practices on well-being among University students”) is proved.

Table-7: Mean SD and t-value of Madarsa and University Students on Spiritual Practices and Well-Being.

Variables	Groups	N	Mean	SD	t-value (df = 98)
Spiritual Practices	Madarsa	50	57.10	1.992	13.52**
	University	50	44.80	6.108	
Well-being	Madarsa	50	218.00	11.212	16.83**
	University	50	179.30	11.807	

**. Significant at the 0.01 level

The Mean and SD in the case of Madarsa students on spiritual practices were found to be 57.10 and 1.992, while in the case of University students were found to be 44.8 and 6.108 respectively. The t-value between two means was found to be 13.52 which was significant at 0.01 level. On the other hand the Mean and SD of Madarsa students on well-being were found to be 218 and 11.212, while in the case of University students were found to be 179.3 and 11.807 respectively. The t-value between two means was found to be 16.83 which was significant at 0.01 level. Thus, the fourth underlined hypothesis of the present investigation that (“there will be significant difference between spiritual practices and well-being among Madarsa and University students”) is proved.’

DISCUSSION

The above findings of this study clearly indicate that spiritual practices significantly influence well-being of Madarsa, University, and overall students. These findings are supported by several research studies such as; spiritual practices enhance the well-being (Koenig et al., 1988; Meisenhelder and Marcum 2004; Hartmann 2006). Myers and Diener (1995) conducted random survey in a sixteen nations and they also found that religious involvement is associated with higher well-being, optimism, and positive expectations for the future.

Further, the obtained result shows significant difference between spiritual practices and well-being among Madarsa and University students. The result also shows higher mean scores on

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spiritual practices and well-being among Madarsa students as compare to the University students. Madarsa educational environment constitutes with Islamic spiritual practices. In contrast university educational environment is quite different from Madarsa with respect to spiritual practices. Madarsa students daily perform various spiritual practices such as; Prayer (salat), Recitation of Holy Quran, Meditation (Zikr, Aurad, and Wazaif) etc. While at the same time University students have been found rarely involved in such spiritual practices and rituals. Therefore, the level of spirituality in the case of University students have been found on the lower side as compare to Madarsa's students.

CONCLUSION

Finally, it is concluded that spiritual practices positively related with overall well-being. It means that frequently involvement in spiritual practices strengthened well-being of the students. Results of the present investigation shows higher well-being among Madarsa students, because of they frequently perform Islamic spiritual practices in daily life as compare to the University students. It is mentioned in Holy Quran and Hadith that Islamic spiritual practices play significant role in managing psychological distress and developing physical fitness as well as inner relief. Now in a present dynamic life, people experience a large number of major as well as chronic psychological distresses, which adversely affected our life in major forms of divorce and suicidal attempts. According to the past literature, theories, and present findings; if we will regularly perform spiritual practices then it will enhance our well-being and save our golden life.

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A Study of Environmental ethics of disabled students

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ABSTRACT:

Education is Basic tool to aware people about the environment. Education for environment is now a day's necessary. Education for the environment encourages behaviors which are environmentally sustainable and also helps ensure that future producers and decision makers demonstrate sensitivity towards environment.

The study was conducted to compare Environmental Ethics of Locomotors and sighted male and female disabled student.

The present study aims to know environmental ethics to disabled students (50 locomotors and 50sighted disabled) and further sample divided in to gender. The disabled students were selected by using random sampling technique from National Association for the Blind Idar Branch Dist. Sabarkantha, North Gujarat which is the branch in district only for disabled Environmental ethics scale developed by Hassen Taj was used to measure environmental ethics. "T" test was used to find out significance difference. The study indicates the difference in environmental ethics of locomotors and sighted disabled students.

On the basis of the findings of the study, investigation indicated that locomotors disabled students have more environmental ethics than sighted. So it should be noticed by the teachers of this unique university that sighted students are unable to visualized whole things which are present in their environment because of their visual disability.

Keywords: *Environment, Students*

INTRODUCTION:

Today Environment has become an international point to discuss in the word. Every human being lives in environment, both effects to each other. Every human being has the right to decent life, but today there are elements in our environment tend to militate against the attainment and enjoyment of such a life. The exacerbation of the pollution of environment can cause untold misery. Unhappiness and suffering to human beings crop up simply because of our lack of concern for the common good and the absence of a sense of responsibility and ethics for sustaining a balanced ecosystem.

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If we are to aspire to a better quality of life- one which will ensure freedom from want, from disease and from fear itself, then we must all join hands to stem the increasing modification of the earth. Besides we should teach them how to save the environment from further degradation, and help make it a healthier and progressive place to live in; this springs from a strong sense of social responsibility. Hence, it becomes obligatory on the part of each individual citizen to develop environmental ethics that, while we aspire for the good life, should not sacrifice the future of the generations to come (Minda C & Sutaria 1990).

Environmental Ethics:

Environmental ethics is the scientific study of various issues related to the rights of the individual with regard to the environment. It is the moral relationship of human beings with the dos and don'ts of the human being to the environment. It is concerned with the dos and don'ts human being to the environment. It deals with ecological rights of all creatures present today as well as those that will follow on the earth. Ethical standards are necessary for long-term conservation and maintenance of nature and its resources.

Environment ethics refers to the responsibility to understand the environmental consequences of our consequences of our consumption and need to recognize our individual and social responsibility to conserve natural resources and protect the earth for future generations.

Environmental ethics is the discipline that studies the moral relationship of human beings to and also the value and moral status of the environment and its nonhuman contents. This entry covers : (1) the challenge of environmental (i.e., human centeredness) embedded in traditional western ethical thinking; (2) the early development of the discipline in the 1960s and 1970s; (3) the connection of deep ecology, feminist environmental ethics and social ecology to politics; (4) the attempt to apply traditional ethical theories, including consequentially, deontology and virtue ethics to support contemporary environmental concerns; and (5) the focus of environmental literature on wilderness and possible future developments of the discipline.

Importance of the study:

Education is the basic tool to aware people about their environment. Every human being is depending on environment for their basic need of good air, water and food. We can see that our environment is going to be disablement elements as right way. So climate is shifting from its natural settings. As result, new diseases are taking birth. Uncertainty of rain is taking place. Low production in field of agriculture is going on. To maintain our environment, we have be aware to the people. People have to acquire basic environmental functions in order to grow food, find water and protect themselves from the climate. We still need knowledge of science and technology to shape and perpetuate the modern world. In field of environmental education, some researchers have been conducted earlier. Thomas (2002) on Environmental ethics, Gayford (1996) on Environmental education in schools, Meyers (2004) on Environmental values and ethics, Neter (1989) on Hispanic cultural influence on environmental concern. Gifford (1982) on

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environmental attitudes, Patel (1995) and Bhattacharya (1996) on environmental awareness, Larsen (1996) on environmental virtue ethics. All these studies have done on teachers, students and General people, but researches on special students about environment is neglected. Disabled is also human being since when every human being would not be aware about protection of their environment, then environment can not be balanced and protected. So this study tries to investigate the environmental ethics of disabled (locomotors and sighted) students of National Association for the blind branch-Idar (SK) which is first unique branch of the world only for disabled. The study aims at offering meaningful suggestions for improving the environmental ethics among the disabled students.

Operational Definition:

Environmental ethics: Environmental ethics refer to the responsibility to understand the environmental consequence of our consumption and need to recognize our individual and social responsibility to conserve natural resources and protect the earth for the future generations.

Disability:

Locomotors disability means disability of the bones, joints, muscles leading to substantial restriction of the movement of the limbs of any form of cerebral palsy. Person with sighted are those with impairment of visual functioning even after treatment or standard refracting correction but who uses or is potentially capable of using vision for the planning of execution of a task with appropriate assertive device. (Rao, 2007)

OBJECTIVES OF THE STUDY:

The study was conducted by taking following objectives:

- To compare Environmental Ethics of Sighted male and female disabled students.
- To compare Environmental Ethics of Locomotors male and female disabled students.
- To compare Environmental Ethics of Locomotors and sighted disabled student.

HYPOTHESIS OF THE STUDY:

- There is no significance difference between Environmental Ethics of Locomotors disabled students in relation to their gender.
- There is no significance difference between Environmental Ethics of Sighted disabled students in relation to their gender.
- There is no significance difference between Environmental Ethics of Locomotors and Sighted disabled students.

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Sample :

The study was carried out on 100 disabled students selected from various Centers of National Association for the blind branch-Idar (SK) The sample consisted of 50 locomotors and 50 sighted disabled, which are divided into male and female in both category. The students were selected for to investigate by using simple Random Sampling technique.

Tools :

Environmental ethics scale developed by Hassen Taj (2001) was used to measure Environmental Ethics of disabled students in present study.

Analysis of Data:

The quantitative data collected through the questionnaire was analyzes by using SPSS Package. Statistical techniques like Mean, Standard Deviation and T-test were used for analysis of the data.

RESULT AND DISCUSSION :

Table No. 1, Significance difference between the means of Environmental Ethics of Sighted male and female disabled students.

Disability	N	Mean	SD	t-value
Sighted male	27	103.86	9.50	0.74
Sighted female	23	105.66	9.91	

The t-value indicates that there was no significance difference between their Environmental Ethics of Sighted male and female disabled students.

Table No. 2, Significance difference between the means of Environmental Ethics of Locomotors male and female disabled student.

Disability	N	Mean	SD	t-value
Locomotors male	23	114.20	8.90	4.12
Locomotors female	27	105.12	9.65	

***Significant at 0.01 level of significance**

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The calculated t-value (4.12) with the degree of freedom is more than the tabulated value at 0.01 levels. Therefore, the Hypothesis there is no significance difference between Environmental Ethics of locomotors male and female disabled students, is rejected and it can be concluded that Locomotors male disabled students have more Environmental Ethics than female Locomotors disabled students.

Table No. 3, Significance difference between the means of Environmental Ethics of Locomotors and Sighted disabled

Disability	N	Mean	SD	t-value
Locomotors	50	111.12	9.07	3.11*
Sighted	50	105.80	11.12	

The calculated t-value (3.11) with the degree of freedom is more than the tabulated values at 0.01 levels. Therefore, the Hypothesis There is no significance difference between Environmental Ethics of locomotors and Sighted disabled, is rejected and it can be concluded that locomotors disabled students have more Environmental Ethics than Sighted disabled students.

MAJOR FINDINGS:

The following are the major findings of the investigation:

- Sighted male and female disabled students do not differ in their environmental ethics.
- There is a Significance difference between the means of Environmental Ethics of Locomotors male and female disabled student.
- There is a significance difference between the Environmental Ethics of Locomotors and sighted disabled students.

On the basis of the findings of the study, investigation indicated that locomotors disabled students have more environmental ethics than sighted. So it should be noticed by the teachers of this unique university that sighted students are unable to visualized whole things which are present in their environment because of their visual disability. Although both categories are under the deprivation but sighted disabled students are more deprived so the teachers should treated specially with them about environmental crisis by Environmental Education because Education about the environment - a basic knowledge and understanding of environmental process (atmospheric, hydrologic, geomorphic and ecological) and concept (green house effect, water conservation, soil erosion and habitat destruction, etc.). Knowledge about human environmental behavior is an indispensable component of the branch of Environmental Education. So by this process, it would be possibility for developing high level environmental ethics in sighted disabled students.

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A Study on Emotional Intelligence among B.Ed. Students in Relation to Gender, Type of Institutional Management and Their Fathers' Education

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ABSTRACT:

The present study aims at investigating the emotional intelligence among B.Ed. students in relation to gender, type of institutional management and their fathers' education. The study has been conducted with 610 B.Ed., college students studying in Puducherry region. The sample was selected by using random sampling technique. The findings of the study reveal that the emotional intelligence among B.Ed. students is high. It is noted that the emotional intelligence among B.Ed. students is not influenced by gender, type of institutional management and their fathers' education

Keywords: *Emotional Intelligence, B.Ed. Students, Gender, Institutional Management, Education*

INTRODUCTION:

Emotional Intelligence is a phrase that incorporates the intricate aspects of both emotion and intelligence. It became a popular phrase in recent times. It involves the ability to monitor one's own and others feelings and emotions to discriminate among them and utilize this information to guide one's thinking and action. The importance of emotional intelligence is firstly highlighted by Thorndike (1920) as a predictor of leadership ability through increasing focus on studying the ability to understand and manage men and women and to act wisely in human relations. Rosenthal (1977) discovered that people who were best at identifying other's emotions were more successful in their work as well as in their social lives. According to Carmeli (2003) emotionally intelligent individuals are expected to recognize, manage, and use their emotions to eliminate the ensuing obstacles and advance their career horizons better than people with low emotional intelligence. Teachers in schools are encouraged to "provide a supportive and productive learning environment", which relies very much on the teacher's emotional intelligence.

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Therefore, the present study is designed to investigate the emotional intelligence among B.Ed. students.

NEED FOR THE STUDY

Emotional intelligence is important because it minimises the chance of interpersonal conflict and it will improve how one interacts socially with others. The higher the emotional intelligence one has, the better the social relations one will have. The ability to take care of our body and especially to manage our stress, which has an incredible impact on our overall wellness, is heavily tied to our emotional intelligence. Emotional intelligence affects our attitude and outlook on life. It can also help to alleviate anxiety and avoid depression and mood swings. By better understanding and managing our emotions, we are better able to communicate our feelings in a more constructive way. We are also better able to understand and relate to those with whom we are in relationship. Understanding the needs, feelings, and responses of those we care about leads to stronger and more fulfilling relationship.

The ability to understand what motivates others, relate in a positive manner, and to build stronger bonds with others in the workplace inevitably makes those with higher emotional intelligence better leaders. An emotionally stable and intelligent leader is also able to build stronger teams by strategically utilizing the emotional diversity of their team members to benefit the team as a whole. Hence, the investigator decided to take up a study on emotional intelligence among B.Ed. students.

OBJECTIVES OF THE STUDY

The present study has the following objectives.

1. To find out the level of emotional intelligence among B.Ed. students.
2. To find out whether there is significant difference in the emotional intelligence among the B.Ed., students with respect to gender.
3. To find out whether there is significant difference in the emotional intelligence among the B.Ed., students with respect to the type of institutional management.
4. To find out whether there is significant difference in the emotional intelligence among the B.Ed., students with respect to their fathers' education.

HYPOTHESES OF THE STUDY

The following hypotheses are formulated from the above objectives.

1. The level of emotional intelligence among B.Ed. students is low.
2. There is no significant difference in the emotional intelligence among the B.Ed., students with respect to gender.
3. There is no significant difference in emotional intelligence among the B.Ed., students with respect to the type of institutional management.

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4. There is no significant difference in the emotional intelligence among the B.Ed., students with respect to their fathers' education.

MEHODOLOGY

The present study has been conducted on 610 B.Ed., College Students studying in Puducherry region. The sample was selected by using random sampling technique. The sample forms a representative sample of the entire population.

TOOLS USED

Emotional Intelligence Scale was constructed and standardized by Anukool Hyde, Sanjyot Pethe, and Upinder Dhar (2001). The scale consists of 10 factors having 34 items with reliability of 0.88 and validity 0.93, standardized on the Indian population. It is used to measure the level of emotional intelligence. The items of the scale are directly related to the concept of emotional intelligence. It includes self-awareness, empathy, self motivation, emotional stability, managing relations, integrity, self-development, value-orientation, commitment and altruistic behaviour. The respondents were required to respond to each item on a 5 point Likert scale.

STATISTICAL TECHNIQUES

1. Descriptive Analysis
2. Differential Analysis

ANALYSIS OF DATA AND INTERPRETATION

Null hypothesis-1

Based on the objective-1 the null hypothesis is framed that the level of emotional intelligence among B.Ed. students is low.

Table-1

TABLE SHOWING MEAN AND SD VALUES FOR EMOTIONAL INTELLIGENCE SCORES OF B.Ed. STUDENTS

Variables	Sample	N	Mean	SD
Emotional Intelligence	Total	610	110.07	16.35

From the above Table-1, the mean and standard deviation of the B.Ed. students are 110.07 and 16.35 respectively. The subject can get a maximum score of 170 and the minimum score of 34. The mean score of the entire sample is 110.07 which is higher than the mid value of 85.

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Hence, it is concluded that the level of emotional intelligence among B.Ed. students is high. Hence, the null hypothesis is rejected.

Null hypothesis-2

There is no significant difference in the emotional intelligence among B.Ed., students with respect to gender.

Table-2

TABLE SHOWING COMPARISON OF MEAN EMOTIONAL INTELLIGENCE SCORES OF MALE AND FEMALE B.Ed. STUDENTS

Gender	N	Mean	Standard Deviation	t-value	Levels of Significance at 0.05 level
Male	113	112.51	16.16	1.77	Not Significant
Female	497	109.51	16.36		

It is found from the above Table-2, the 't' value is found to be 1.77 which is not significant at 0.05 level. It is concluded that there is no significant difference in the emotional intelligence between Male and Female B.Ed., Students. Hence, the null hypothesis is accepted.

Null hypothesis-3

There is no significant difference in emotional intelligence among B.Ed., students with respect to the type of institutional management.

Table-3

TABLE SHOWING "F" RATIO FOR TYPE OF INSTITUTIONAL MANAGEMENT AND EMOTIONAL INTELLIGENCE

Source of Variation	Sum of Squares	df	Mean Square	F	Levels of Significance at 0.05 level
Between Groups	847.52	2	423.76	1.58	Not significant
Within Groups	162093.85	607	267.04		
Total	162941.37	609			

It is clear from the above Table-3, the 'F' ratio is not significant at 0.05 level. Hence, the null hypothesis is accepted. It is concluded that the B.Ed. students studying in different type of institutional management do not differ significantly in their Emotional Intelligence.

A Study on Emotional Intelligence among B.Ed. Students in Relation to Gender, Type of Institutional Management and Their Fathers' Education

Null hypothesis-4

There is no significant difference in the emotional intelligence among B.Ed., students with respect to their fathers' education.

Table-4

TABLE SHOWING "F" RATIO FOR FATHER'S EDUCATION AND EMOTIONAL INTELLIGENCE

Source of Variation	Sum of Squares	df	Mean Square	F	Level of Significance at 0.05 level
Between Groups	738.67	2	369.33	1.38	Not Significant
Within Groups	162202.70	607	267.22		
Total	162941.37	609			

It is clear from the above table-4, the 'F' ratio is 1.38, which is not significant at 0.05 level. Hence, the null hypothesis is accepted. Therefore the fathers' educations of B.Ed. Students do not significantly differ in their emotional intelligence.

CONCLUSION

On the basis of the finding of the study the emotional intelligence among B.Ed., students is high. It can be concluded that gender, type of institutional management and their fathers' education have no significant effect in emotional intelligence among the B.Ed., students in Puducherry region.

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Meditation –Peace of Mind

Sonal D. Parmar¹

ABSTRACT:

Everyone wants to be well and they also want healthy mind and body because healthy mind and body is the way to being healthy. To be healthy one's should be positive toward their self-worth and doing yoga and meditation regularly. Meditation is a creative process that relaxes the taut nerves and muscles of our body and rejuvenates our dissipated mental and physical energies. Meditation makes you aware - that your inner attitude determines your happiness. Meditation has two important benefits: 1) physical health 2) mental health. Today studies suggest that meditation can also help improve mental disorders such as the desire to self-harm. A study at the University of Melbourne showed that meditation helped improve the brain's activity to patterns associated with positive emotions. To experience the benefits of meditation, regular practice is necessary. It takes only a few minutes every day. Once imbibed into the daily routine, meditation becomes the best part of your day! Thus, meditation help us lot.

Keywords: *Meditation, Yoga, peace of mind.*

INTRODUCTION:

Meditation is a practice in which an individual trains the mind or induces a mode of consciousness. The word *meditation* carries different meanings in different contexts. Meditation has been practiced since antiquity as a component of numerous religious traditions and beliefs. Meditation often involves an internal effort to self-regulate the mind in some way. Meditation is often used to clear the mind and ease many health concerns, such as high blood pressure, depression, and anxiety. It may be done sitting, or in an active way—for instance, Buddhist monks involve awareness in their day-to-day activities as a form of mind-training.

This article is about the impact of meditation on daily life and peace of mind. Meditation may involve generating an emotional state for the purpose of analyzing that state—such as anger, hatred, etc.—or cultivating a particular mental response to various phenomena, such as compassion. The term "meditation" can refer to the state itself, as well as to practices or techniques employed to cultivate the state.

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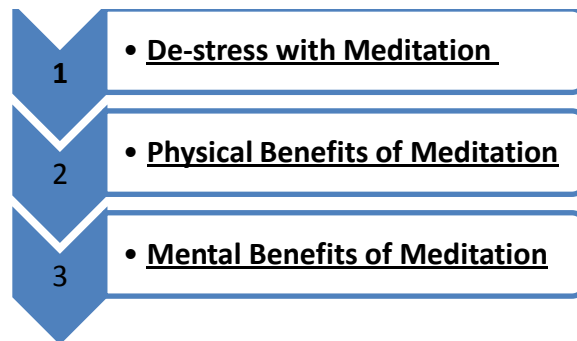
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Regular practices of the technique can totally transform the quality of one's life, by culturing the system to maintain the peace, energy and expanded awareness throughout the day. These meditation techniques combined with yogic practices can ensure good health and a calm mind. Meditation allows the conscious mind to settle deeply in the Self, giving it rest. When the mind settles down, it lets go of all tension, making one healthy and focused.

The human mind is very complex; the mind has very delicate and beautiful aspects. The mind has rough and tough aspects. Meditation can bring about a balance between the different states of the mind. Through meditation and letting go, you can switch from the rough and tough aspect to the delicate aspect within you. You can stand up when need be, and you can relax when need be. This ability is present within everyone, and meditation enables you to play these roles effortlessly. So, when you feel very rough, resistant, or angry - sit and relax, observe, and mentally let go.

Benefits of Meditation

Everyone can enjoy all these benefits and much more, with meditation. Meditation offers innumerable benefits for your body, mind and spirit. The rest you gain in meditation is deeper than the deepest sleep. The deeper your rest, the more dynamic your activity is.



De-stress with Meditation

Meditation has two important benefits:

- Meditation prevents stress from getting into the system
- Meditation releases accumulated stress that is in the system

Both of these happen simultaneously, leaving one refreshed and joyful.

Physical Benefits of Meditation

With meditation, the physiology undergoes a change and every cell in the body is filled with more prana (energy). This result in joy, peace, enthusiasm as the level of energy in the body increases.

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On a physical level, meditation:

- Lowers high blood pressure
- Lowers the levels of blood lactate, reducing anxiety attacks
- Decreases any tension-related pain, such as, tension headaches, ulcers, insomnia, muscle and joint problems
- Increases serotonin production that improves mood and behavior
- Improves the immune system
- Increases the energy level, as you gain an inner source of energy

Mental Benefits of Meditation

Meditation brings the brainwave pattern into an Alpha state that promotes healing. The mind becomes fresh, delicate and beautiful. With regular practice of meditation:

- Anxiety decreases
- Emotional stability improves
- Creativity increases
- Happiness increases
- Intuition develops
- Gain clarity and peace of mind
- Problems become smaller
- Meditation sharpens the mind by gaining focus and expands through relaxation
- A sharp mind without expansion causes tension, anger and frustration
- An expanded consciousness without sharpness can lead to lack of action/progress
- The balance of a sharp mind and an expanded consciousness brings perfection

Meditation makes you aware - that your inner attitude determines your happiness.

CONCLUSION:

Thus, we live in the land of diversities and differences. So that it's not easy to keep yourself undisturbed, but it'll happen as you keep doing the practices regularly. You meditate and calm your mind, then go on with other activities. Then it'll become easy. Let go of all effort - to stop thoughts, or to concentrate, or to contemplate.

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Assessment of Alienation among the Madrasa Students of Kashmir Valley

Mohammad Ashraf Malik¹

ABSTRACT:

Background: In the Muslim world Madrasa is the main source of education. Throughout the world Madrasas are imparting education to Muslim students. Due to lack of modern education and Urdu medium system in the Madrasa, the students enrolled in these Madrasa could not compete with the other students. So, they face lot of problems in making their psychological and social adjustment. They get alienated from themselves and their society because their degree's are not recognized anywhere. This creates lot of difficulties in getting jobs.

Objective: The main objective of paper is to assess the level of alienation among male and female madrasa students.

Method: The present study was conducted on the sample of 120 male and female Madrasa students. The data was collected from the Kashmir (India). For the purpose of data collection from different Madrasa students, alienation scale developed by Kureshi and Dutt (1979) was administered on subjects. The subjects were randomly selected. For the result purposes Mean, S.D. and t -test were calculated.

Results: The results showed that both male and female madrasa students are experience the level of alienation. However, on the basis of mean score male students shows high mean score (M=48.98) as compared to female students (M=44.98). While as no significant difference were found in their alienation scores.

Conclusion: Alienation was found to be common in madrasa students especially in male as compared to female students. There is need of further research in this area. So that this problem could be highlighted and addressed in order to prepare and to generate the coping ability among them.

Keywords: Alienation, Madrasa, Students, Education, Kashmir

INTRODUCTION:

Alienation is the lack of association feeling, feeling of separation from family, friends and friends (Bronfenbrenner, 1986). The term alienation is derived from the word alien means 'foreign' or estranged.

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In other words alienation can be describes the condition of the subject who no longer recognizes himself or rather can only recognize himself by others. If this is the mean that is chosen, the man who alienated would in some sense be foreign or separated from himself. He is stranger in his own society, one who does not belong to anywhere or anybody. The concept of alienation originated from Hegel who denotes the distance between mind and reality, and denotes states causing self-alienation, loss of self-identity, and feeling of depersonalization, cause of which may be traced back to some environmental pressures. The characteristics of alienated individual include a tendency in his own fanciful world, resenting and rejecting the norms and traditions of society. Thus he may give way to his uncontrolled desires thereby distracting the harmonious relationship between himself and society. This way he becomes estranged from the outside world.

Alienation has been found to be related with loss of self, anxiety state, depersonalization, restlessness apathy, social disorganization, loneliness, atomization, powerlessness, meaningfulness, isolation, pessimism, and the loss of belief or value (Josephson, 1962).

Alienation may be viewed as a result of pervasive social forces beyond schools, such as specialization, mobility, bureaucratization, capitalism, or other features of the modern world that fragment human experience (Davison, Aviles, Guerrero, Howarth, & Thomas, 1999). Alienation is term used to describe students estrangement in the learning process (Brown, Higgins, & Paulsen, 2003). Social estrangement is the result of a student's inability or unwillingness to integrate into school's social existing network (Brown et.al. 2003). A student who feels estranged typically doesn't accept the goals and values of a school and tends to reject school and all that it stands for (Rafalides & Hoy, 1971).

According to the Brown et. al (2003) "when students believe that , they can personally do influence their future in school, they disengage from process". These students learn that their complaint and concerns go unheard and eventually rebellious behavior such as skipping class, not doing or turning in homework, and thwarting school norms and rules replace efforts to learn (Mau, 1992).

OBJECTIVES

1. To study the level alienation among male and female madras students.
2. To examine the significant difference between the male and female madrasa students of in their level of alienation.

HYPOTHESES

1. There is no significant difference between the real mean and the assumed among male and female madras students in their level of alienation.
2. There is no significant difference between the male and female students of madrasa in their level of alienation.

METHODOLOGY

Sample

The present study was conducted on the sample of 120 madrasa students both male and female. The subjects were randomly selected. Out of the total sample 60 were male and 60 were females.

Tool used

In the present study for the measurement of alienation among Madrassas students, Kureshi & Dutt (1979) alienation scale was used to collected data from the subjects. The scale consists of 21 items and each item is followed by four alternative options that ranges from 'always' to 'never' representing the five factors despair, disillusionment, unstructured universe, psychological vacuum and narcissism. Out of these 21 items, the item no's. 3,12,18,21 are negative items. The scoring for the all other items except form the negative ones is 4,3,2,1. While as negative items are scored as, 1,2,3,4. The cut of score for detecting individual sense of alienation is 42 or above. The reliability of the scale calculated through Cronbach's Alpha was found .76.

Procedure

First of all, the investigator met the participants personally and explained them the purpose of the present study. Then after, the investigator established rapport with the participants and requested them to participate voluntarily and cooperate in the data collection process and assured them that their responses would be kept confidential and utilized for the research purposes only. The participants were asked to read the instructions carefully given on the top of each scale. They were also requested to answer all the statements given in the scales sincerely. After receiving their consent, alienation scale, along with personal data sheet were administered to madrasa students.

Data analysis

For the result purpose, the data was analyzed by using statistical package for social science (SPSS) version 16.0 according to the research questions. Mean and S.D and t-test were applied to know difference in the level of alienation among male and female madrasa students.

RESULTS

To know the level of alienation among male and female madrasa students the inferential statistics Mean, S.D., and t-test for one-sample were applied. The results are given as below:

Hypothesis: 1. *There is no significant difference between the real mean and the assumed mean among male and female madrasa students in their level of alienation.*

Table No -1. Result of t-test for one sample

Groups	N	Real Mean	Test Value	S.D.	Df	T	Level of Sig.
Male	60	48.38	50	9.033	59	1.38	Sig. at .01
Female	60	44.98	50	8.621	59	4.50	Sig. at .05

Result given in table-1, shows that the level of alienation among male and female Madrasa students. In male students real mean is (48.38) which is lower than the assumed mean (i.e., 50) but the t-value ($t=1.38$) is significant at 0.01 level. Similarly the real mean among female is (44.98) is also lower than the assumed mean (i.e., 50) while as t-value ($t=4.50$) is significant at 0.05 level. This confirms the rejection of null hypothesis, *There is no significant difference between the real mean and the assumed mean among male and female madrasa students in their level of alienation.*

Hypothesis:2, *There is no significant difference between male and female madrasa students of in their level of alienation.*

Table-2. Comparison between male and female madrasa Students in their level of alienation

Groups	N	Mean	S.D.	SE..D	T	Level of sig.
MALE	60	48.98	9.033	1.612	.037	In Sig.
FEMALE	60	44.98	8.621	1.612		

The table-2, depicts that the difference between the mean score of male and female students of madrasa in their level of alienation is (48.98) and (44.98) respectively. The standard deviation of both the groups are (9.033) and (8.621). The t-value ($t=.037$) is not significant because it fails to reach the significance level criterion. This indicates that both the groups did not differ significantly in their alienation score. Hence both male and female students are experiencing equal amount of alienation.

DISCUSSION

The present investigation was aimed to measure the level of alienation among male and female madrasa students of Kashmir. As noticed in results both male and female students are experiencing the feeling of alienation but on the basis of mean score differences in alienation, male students is slightly higher than the female students which means that male students are more prone to the alienation as compared to females madrasa students and in addition to this significant differences between real mean and assumed mean were found in their alienation scores. Thus H1 is rejected. Further, when the both of the groups were compared, it has been observed that no significance difference were found in their alienation scores. Hence H2 was accepted.

The whole result suggested that both males as well as female madrasa students are equally experiencing the alienation. There may be several reasons for this like lack of reorganization and modern education which keeps them at bay when they are comparing themselves with other students. The other issues are lack of skilled teachers, libraries, modern curriculum and books are also vibrant causes for alienation among them. Usually they are abided with the Islamic education while as least focus is given towards other modern subjects like science, mathematics, English etc. which is the need of hour. Similarly the conservative thinking and negative parental attitudes towards girl education especially regarding modern education are also an important factor.

CLINICAL IMPLICATION

- The main aim of this study was to measure level of alienation among madrasa students. Alienation is believed to be common variable found among students.
- Alienation is said to be root cause of health problems like depression, stress, anxiety, etc. among students, in this regard psychologist can play important role in generating ability a coping skill among them.
- Madrasa students loss their identity because their degrees are least recognized, so they could not compete with the other modern school students and that make feel them down and they lost their self confidence. In this regard a proper psycho social intervention could help them to restore their self confidence and belief.

LIMITATIONS

- In the present study on gender was taken into consideration while as other demographical variables like age, residential status, socio-economic status etc. was not included into the study.
- The Study was conducted on the 120 madrasa students.

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Level of Anxiety and Depression among Postgraduate Psychology Students

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ABSTRACT:

The authors examine the level of Anxiety and Depression among Postgraduate Psychology Students. The study was conducted using Hamilton Anxiety Scale in Clinical Evaluation (HAM – A) and Beck Depression Inventory (BDI). The results elicit that the level of Anxiety is high as compared with the level of Depression. Among Social Drinkers, the level of Depression was found to be high and among Non – Social Drinkers the level of Anxiety was found to be high. The results elicits a significant positive correlation between Anxiety and Depression. From the HAM – A tool, the domains of Anxiety were also studied, viz., Psychic Anxiety and Somatic Anxiety, which infers in the study that the level of Psychic Anxiety is high as compared to Somatic Anxiety in both the groups.

Keywords: Anxiety, Depression, Social Drinkers

INTRODUCTION:

The relation between Anxiety and Depression, long the concept of controversy among clinicians, researchers and theorists, has come the subject of renewed interest. Therefore, a review of the relationship of Anxiety and Depression is timely from several points of view – theoretical, diagnostic and therapeutic.

Anxiety: is most generally, a vague, unpleasant emotional state with qualities of apprehension, dread, distress and uneasiness. Everyone experiences Anxiety. It is characterized most commonly as a diffuse, unpleasant, vague sense of apprehension, often accompanied by autonomic symptoms such as headache, palpitations, perspiration, tightness in the chest, mild stomach discomfort, and restlessness indicated by an inability to sit or stand still for long. Anxiety is frequently distinguished from Fear by its being often (usually say some, always insist others) objectless, whereas fear assumes a specific feared object, person or event. In Freudian theory, anxiety is treated as 1, with the additional assumption that it acts as a signal that psychic danger would result were an unconscious wish to be realized or acted upon.

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Depression: Mood is a pervasive and sustained feeling tone that is experienced internally and the influences a person's behaviour and perception of the world. Affect is the external expression of mood. Mood can be normal, elevated, or depressed. Healthy persons experience a wide range of mood and have an equally large repertoire of affective expressions, they feel in control of their moods and affects. It is the part of experience to feel unhappy at times of adversities. The symptom of depressed moods is a component of many psychiatric syndromes and is also commonly found in certain physical diseases, for example, in infections such as hepatitis and some neurological disorders. The central features of Depression are depressed mood, negative thinking, lack of enjoyment, reduced energy and slowness.

METHODOLOGY

The data is collected using Hamilton Anxiety Scale (HAM – A) and Beck's Depression Inventory (BDI) on the post – graduate psychology students (female) in the present investigation to study the levels of anxiety and depression.

Operational Definition: Social Drinking refers to casual drinking in a social setting without an intention to get drunk. According to National Institute on Alcohol Abuse and Alcoholism (NIAAA), “low risk” drinking for females consist of no more than 7 drinks per week and no more than 3 drinks per sitting. For males, it consist of no more than 14 drinks per week and no more than 4 drinks per day. When they drink, they are not bad consequences or problem that occur. If they have a drink, they don't have any surprises friends don't complaint about their behaviour. They don't end up with mood swings, and they don't start nasty fights. Usually a social drinker really doesn't think too much about having a drink. Alcohol isn't constantly on their mind, also, they don't end up losing control or have to come up with a limit because it doesn't go any further than having a drink socially once in a while. A unit can be related to everyday measures for it corresponds to half a pint of beer (8g per pint), one glass of table wine (8g per glass), one conventional glass of sherry or port (150g per bottle), and one single bar measure of spirit (8g – 12g).

Sampling: Two group research design and Non – Probability Convenient Sampling method was used over 40 female post-graduate (psychology) students. The sample is divided in two groups i.e., Group A, as Social Drinkers and Group B as Non – Social Drinkers studying the above mentioned two variables, Anxiety and Depression.

The population was collected between 20 and 30 years of age. For the Social Drinkers, it was a compulsion of being drinking over the duration of one year, must have been drinking in social gatherings (3 drinks per sitting) and with an intention of not getting drunk.

Student living with single parents or living away from family as paying guest or with any other psychiatric illness or going through any kind of physical illness were excluded from the present study.

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Hypothesis: a) there will be significant difference among Anxiety and Depression in Postgraduate Psychology Students, b) there will be significant correlation between the Anxiety and Depression among Social and Non – Social Drinkers.

Analysis of Data: Appropriate Statistical Technique such as Mean, Standard Deviation, Correlation and t – tests were used to analyse the data collection, statistical Package, SPSS 17.00 was used for this purpose.

RESULT

Table I indicates the mean scores of Anxiety and Depression of the total group, 17.0000 and 16.8000 respectively, infer that the level of Depression (12.3500) is higher in the Group A and level of Anxiety (4.7000) is higher in Group B.

Table II infers that Anxiety and Depression have a significant positive correlation.

Table III elicits Correlation between Anxiety and Depression for Group A, viz., Social Drinkers.

Table IV elicits Correlation between Anxiety and Depression for Group B, viz., Non - Social Drinkers.

Table I

	GROUP	N	MEAN	Std. Deviation	t – value	Sig – (2 tailed)
ANXIETY	Social Drinkers	20	12.3000	7.1458	4.023	.000
	Non – Social Drinkers	20	4.7000	4.5085		
PSYCHIC ANXIETY	Social Drinkers	20	7.7000	3.7148	4.492	.000
	Non – Social Drinkers	20	3.2000	2.5047		
SOMATIC ANXIETY	Social Drinkers	20	3.9000	4.2907	2.332	.025
	Non – Social Drinkers	20	1.4000	2.1374		
DEPRESSION	Social Drinkers	20	12.3500	7.1398	4.125	.000
	Non – Social Drinkers	20	4.4500	4.7292		

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Table II

		ANXIETY	SOMATIC	PSYCHIC	DEPRESSION
ANXIETY	Pearson Correlation	1.000	.916(***)	.897(***)	.659(***)
	Sig. (2 – tailed)	.	.000	.000	.000
	N	40	40	40	40
PSYCHIC	Pearson Correlation	.916(***)	1.000	.666(***)	.648(***)
	Sig. (2 – tailed)	.000	.	.000	.000
	N	40	40	40	40
SOMATIC	Pearson Correlation	.897(***)	.666(***)	1.000	.521(***)
	Sig. (2 – tailed)	.000	.000	.	.001
	N	40	40	40	40
DEPRESSION	Pearson Correlation	.659(***)	.648(***)	.521(***)	1.000
	Sig. (2 – tailed)	.000	.000	.001	.
	N	40	40	40	40

**. Correlation is significant at the 0.01 level (2 – tailed).

Table III

		ANXIETY	SOMATIC	PSYCHIC	DEPRESSION
ANXIETY	Pearson Correlation	1.000	.852(***)	.895(***)	.510(***)
	Sig. (2 – tailed)	.	.000	.000	.022
	N	20	20	20	20
PSYCHIC	Pearson Correlation	.852(***)	1.000	.566(***)	.389(***)
	Sig. (2 – tailed)	.000	.	.009	.090
	N	20	20	20	20
SOMATIC	Pearson Correlation	.895(***)	.566(***)	1.000	.479(***)
	Sig. (2 – tailed)	.000	.000	.	.033
	N	20	20	20	20
DEPRESSION	Pearson Correlation	.510(***)	.389(***)	.479(***)	1.000
	Sig. (2 – tailed)	.022	.090	.033	.
	N	20	20	20	20

**. Correlation is significant at the 0.01 level (2 – tailed).

*Correlation is significant at the 0.05 level (2 – tailed).

Level of Anxiety and Depression among Postgraduate Psychology Students

Table IV

		ANXIETY	SOMATIC	PSYCHIC	DEPRESSION
ANXIETY	Pearson Correlation	1.000	.938(***)	.925(***)	.510(***)
	Sig. (2 – tailed)	.	.000	.000	.022
	N	20	20	20	20
PSYCHIC	Pearson Correlation	.938(***)	1.000	.741(***)	.676(***)
	Sig. (2 – tailed)	.000	.	.000	.001
	N	20	20	20	20
SOMATIC	Pearson Correlation	.9255(***)	.741(***)	1.000	.242
	Sig. (2 – tailed)	.000	.000	.	.305
	N	20	20	20	20
DEPRESSION	Pearson Correlation	.510(***)	.676(***)	.242(***)	1.000
	Sig. (2 – tailed)	.022	.001	.305	.
	N	20	20	20	20
**. Correlation is significant at the 0.01 level (2 – tailed).					
*Correlation is significant at the 0.05 level (2 – tailed).					

SUMMARY

Everyone feels sad or worried from time to time. Unpleasant feelings are a normal part of life. But when Depression and Anxiety interferes with work, play and/or relations, then, it turns important to take significant action over it. Experts estimate that almost a quarter of people in this world will experience significant problems with anxiety at some point of their lives. And between 15 – 20% of people will succumb to the average of Depression at one point or another.

The present piece of work has shown significant findings (according to raw scores) which concluded that majority of the students have higher level of Anxiety as compared to Depression, whereas among Social Drinkers, majority of students have higher level of Depression as compared to Anxiety.

HAM – A, in Group A (Social Drinkers) elicited that 5% of the population faced Severe Anxiety, 26% of the Strata faced Moderate Anxiety and 68% of the Sample faced Normal Level of

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Anxiety. Ironically, according to BDI, it was elicited that 5% of the population faced, Possible Denial of Depression, Faking Good; which infers that students are denying the fact that they are facing difficulty in balancing their emotions with the daily life and are faking to the other people that they are happy with their lives, 20% face Moderate to Severe Depression, 30% of them face Mild to Moderate Depression and the rest 45% experience normal level of mood swings (mood ups and downs).

HAM – A, in Group B (Non – Social Drinkers) elicited that 5% experienced Mild level of Anxiety and rest 95% faced Normal level of Anxiety. Ironically, BDI, elicited that 65% of the population faced Possible Denial of Depression, Faking Good, 25% experiences normal level of mood swings (moods ups and downs) and rest 10% of them faced Mild – Moderate Depression.

INTERPRETATION

Hypothesis a) expected that there will be significant difference among Anxiety and Depression in Postgraduate Female Students; which is supported by both the variables i.e., Anxiety and Depression. Although there is a very minute difference between the two but still it depicts that the level of Anxiety is higher as compared to the level of Depression. Further the level of Anxiety and Depression is checked in two domains, first in Group A (Social Drinkers) and Group B (Non – Social Drinkers). The mean scores of Anxiety and Depression in Group A (Social Drinkers), evidences that the level of Depression is high. The mean scores of Anxiety and Depression in Group B (Non – Social Drinkers), indicates that level of Anxiety is higher. The mean scores of the domains of Anxiety i.e., Psychic Anxiety (mental agitation and psychological distress) and Somatic Anxiety (physiological complaints related to Anxiety) that Psychic Anxiety is high as compared to the Somatic Anxiety.

In Group A (Social Drinkers), the mean scores of the domain of Anxiety viz., Psychic Anxiety and Somatic Anxiety shows that Psychic Anxiety is high as compared to the Somatic Anxiety and same was the result of the Group B (Non – Social Drinkers). A basic reason for the high levels of Psychic Anxiety among postgraduate students could be daily stress like, worries about the career aspects, meeting the deadlines of the college tasks and providing best performance in their clinical practice.

Hypothesis b) expected that there will be correlation between the level of Anxiety and Depression among Social Drinkers and Non – Social Drinkers, where a positive significant correlation was found between the level of Anxiety and Depression. In both the groups, viz., Social Drinkers and Non – Social Drinkers, Anxiety was found to have positive significant correlation with Depression.

IMPLICATIONS

The present study is a valuable contribution for the female students pursuing psychology. The results of this study have the following implication:

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1. The results indicate that the level of Anxiety and Depression, both act together among Psychology Students. The degree of variation of Anxiety and Depression may be high or low.
2. The raw scores of the study imply for some of the students an urgent call for clinical observation as the test result indicates that they have Severe Depression or Severe Anxiety.

LIMITATIONS

The present study has the following limitations:

1. Since the sample size is small, reliable generalization cannot be done.
2. Only Psychology students have been included, if students of other fields would have also been considered, findings would have been better.
3. Female students who Smoke have not been included in the study, had this factor included then the level of anxiety and depression would have been more specific.
4. If male students were also included, a comparison between male and female studies could have been made.

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The Mediating Effect of Coping Styles on the Optimism Athletic Performance Relationship among Track and Field Athletes

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Keywords: *Mediating Effect, Optimism Athletic. Athletes*

INTRODUCTION:

Sport participation powers all aspects of an individual's make up and help him/her in accomplishing composure, balance and courage. It also helps the individual in inspiring his spirits, rejuvenating inner sources of faith, mastering the skills and meeting the challenges of modern life with ease and calmness. Even though many factors are found to affect athletic performance, no study has clearly shown which factor better predicts performance, which is a clear indication of some mediating factors affecting sport performance.

The history of sports in India dates back to the Vedic era. Even though Indian athletics has witnessed improvements in terms of facilities and infrastructure, the general standard of competition still has scope for a lot of improvement. At this juncture comes the role of sport psychology. Many Psychological factors influence an individual's participation in sports. Some of them have a direct effect while some others act as mediators or moderators. An insight into how all these psychological constructs function in sport and physical activity is much important to sports psychologists. Generating such knowledge will have practical implications for coaches, players and trainers.

Athletic performance is an expression that is distinct from many of the broader sports science concepts, such as health, fitness, or longevity. Athletic performance describes the efforts made by an athlete to attain specific performance objectives over a period of time. The natural talent or fitness of the athlete will impact the level of performance. "Athletic performance is operationally defined as Carrying out of specific physical routines or procedures by one who is trained or skilled in physical activity, influenced by a combination of physiological, psychological, and socio-cultural factors". All athletes ultimately measure performance by their own standards. Performance is usually regarded as an aggregation of individual results, such as performance over a month, or a season of competition, as opposed to a single or isolated activity. Athletic performance includes not only the assessment of a particular result, but also the concept of recovery;

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how quickly an athlete can return to the regular training or routine is an important performance factor, as recovery will dictate how the athlete is able to prepare for the next event.

Athletes are forced to cope with the stresses that arise from competing head-on with others in activities that are important to the athletes and to others, such as parents, coaches, and peers. Some athletes learn to cope successfully with these stresses, and for them sports are enjoyable and challenging. Others who are unable to cope find sport participation to be a stressful and threatening experience. Coping is defined as an individual's cognitive, emotional, and action tendency efforts to manage specific external and/or internal demands. (Crocker, Kowalski & Graham, 1998; Lazarus, 1999). According to Lazarus & Folkman (1984) "coping" should be viewed as a process which is dynamic, depending upon the individual's evaluation of a given situation. But inappropriate and unproductive coping styles have been found to have a variety of harmful outcome, such as adjustment difficulties and health problems on the athlete (Nicolotti, Elsheikh and Whiteson, 2003). The sub variables in coping styles in this study include both positive and negative coping strategies. Carver, Scheier, and Weintraub (1989) have found a positive association between acceptance and optimism and self-esteem. A disposition or tendency to look on the more favorable side of events or conditions and to expect the most favorable outcome. Individuals with an optimistic explanatory style consistently outperform those with a pessimistic explanatory style. [Seligman, (1990); Hanrahan & Grove (1990)]. Evidences indicate that optimism enhances motivation, persistence and performance (Carver & Scheier, 2002b). Gordon and Kane (2001) found a highly significant positive relationship between optimism and performance. They also found that people with an optimistic attribution style not only try harder, but may actually enhance their performance after receiving negative feedback.

A study by Parnabas, Mahmood, and Ampofo-Boateng (2009) on cognitive, somatic and negative coping Strategies among Malaysian athletes examined the relationship between competitive anxiety and coping strategies among athletes of different levels of representation in Malaysian sports. The results showed that national athletes used the highest level of cognitive strategies and district level athletes used the highest level of negative coping strategies. There was also a negative correlation between cognitive coping strategies, and cognitive anxiety. Athletes, who used the highest levels of cognitive, somatic or negative coping strategies, achieved the highest performance in sports. Kraaij, Garnefski and Schroevers (2009) in their article on coping, goal adjustment and positive/negative affect reported that, positive ways to handle stress, were related to positive affect, while negative ways to deal with stress were related to negative affect. Cognitive coping strategies seemed to have a stronger influence on affect than the behavioral coping strategies. Anshel and Gangyan (2008) in the article "Coping Styles Following Acute Stress in Sport Among Elite Chinese athletes" lent support to the transactional coping theory that coping style is a

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function of the type of stressful event. Jani and Daroji (2005) examined coping strategies responses employed by school athletes to manage stress. Findings indicated that males use higher percentage of coping strategies in both emotion-focused and problem-focused coping than females in managing stress. It was found that the subjects have little knowledge or skills in managing stress. The results imply that coaches at schools should handle a psychological skills training programme and identify the sport specific nature of coping stress that will be useful for developing athletes performance.

Prakash and Koplan (2003) in their article on “Shy Skaters Shyness, Coping, and Adjustment Outcomes” revealed that shyness was associated with increased somatic (physiological) anxiety prior to competitive performance. The results revealed that coping style acts as a protective factor against the potential negative outcomes associated with shyness in the realm of athletics.

Goyen and Anshel (1998) examined different sources of acute stress and related coping processes following stressful events in competitive sport. Males used problem-focused coping and females used emotion focused coping after the stress. Therefore there is a need for coaches and parents to be careful in their communication style when providing critical feedback on performance. In addition, since younger athletes use maladaptive coping skills more often than older competitors, they are more susceptible to both acute and chronic forms of stress in sport.

Evidences indicate that optimism enhances motivation, persistence and performance (Carver & Scheier, 2002b). People who view desired outcomes as attainable continue to exert efforts at attaining those outcomes, even when doing so is difficult. When outcomes seem sufficiently unattainable, people reduce their efforts and eventually disengage from the pursuit of goals. From this notion, outcome expectancies between two different types of behavior develop. Evidence indicated that optimism enhances motivation, persistence and performance and the ability to strive for success and persistence in the face of failure is associated with many forms of achievement motivation (Carver & Scheier, 2002a). Problem-focused coping and emotion-focused coping capture individual differences in characteristic ways of dealing with stress. They are also known as ways of coping or styles of coping and they have implications for performance outcomes (Skinner & Zimmer-Gembeck, 2007).

At the team level, Gordon and Kane (2001) conducted a study analyzing optimism and performance in the game of soccer. The results revealed a highly significant positive relationship between optimism and performance. The performance of pessimistic soccer players varied as a function of the teams’ performance (i.e., when the team was winning these players performed well, but their performance was worse in losing matches). The results supported the hypothesis that people with an optimistic attributional style not only try harder, but may actually enhance their performance after receiving negative feedback.

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Seligman, Nolen-Hoeksema and Thornton (1990) in studying swimmers, showed optimistic swimmers used the negative feedback to motivate their actions and swim significantly faster on their second trial, whereas pessimistic swimmers used the negative feedback to further depress their actions, resulting in slower times. They also found that pessimistic swimmers achieved more unexpected poor performances during competition than optimistic swimmers and pessimistic swimmers who performed less well than expected on the first trial, performed worse on additional trials. Optimistic swimmers who performed less well than expected, performed significantly better on additional trials. Gordon and Kane (2002) examined how attributional style affects motivation, and subsequent athletic performance. Kane (2002) found positive relationship between optimism and athletic performance. Their data also suggest that optimists maintain motivation and performance during losing games, whereas pessimists' performance deteriorates under such circumstances. Rudski (2004) found optimism to be positively and pessimism to be negatively related to religiosity. Pessimism was also positively related to the superstitious beliefs.

Optimism is a style of reasoning about cause (Buchanan & Seligman, 1995). Optimists attribute good events with permanence (likely to recur), pervasiveness (the 'goodness' will extend to other future events) and internality (I caused it and can cause it again). Researches suggests that optimism is important in coping with difficult life events. Optimism has been linked to better responses to various difficulties, from the more ordinary transition to college (Brisette, Scheier, & Carver, 2002) to the more severe coping with missile attacks (Zeidner & Hammer, 1992). Optimism appears to play a protective role, assisting people in coping with unusual trying incidents. Also, optimism has been found to correlate positively with life satisfaction and self-esteem (Lucas, Diener, & Suh, 1996). Segerstrom and Sephton (2010) found that changes in optimism would predict changes in positive affect. Optimists are also able to recover from disappointments more quickly by attending to positive outcomes to a greater extent than negative ones. Litt and colleagues (1992). Optimists are also more likely to engage in problem solving when faced with difficulties, which is itself associated with increased psychological well-being (Taylor et al., 1992). Optimists also tend to accept the reality of difficult situations while also framing them in the best possible light (Carver et al., 1993). Aspinwall & Taylor (1992) found that Optimism at the beginning of college predicted a smoother, psychologically healthier transition to college life, as well as larger groups of new friends. Tamara & osin (2013) after studying optimistic attributional style found that optimism mediated the relationship between academic achievement and self esteem and success expectations predicted actual performance. Success expectations, in turn, were predicted by optimistic attributional style for positive events.

These reviews support the hypothesis that people with an optimistic attributional style not only try harder, but may actually enhance their performance after receiving negative feedback, whereas pessimists perform worse than optimists.

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Need and significance

The present study focuses on adolescent athletes as its target group. Youth, in any society, is the future of that society. The lessons taught to the youth of today will be with them for the rest of their lives. Competition teaches more than just how to win and lose, it teaches a person how to win with class and at the same time be gracious in defeat. It promotes respect for opponent and teammates. All of these traits can be beneficial in every aspect of life, not just in the sporting arena. Therefore focusing on young adults has a high relevance in facilitating national development.

Coping Skills play a very important role in the athlete's future performance. Obtaining information about the nature and application of coping strategies used by athletes has special appeal for practitioners in sport psychology because it offers a foundation for interventions. an optimist is someone who "finds opportunity in every difficulty." This principle is particularly true in athletics. Much research has shown that athletes and teams that have an optimistic interpretation of their performance (especially after losing) will consistently outperform those who view their performance and losses from a negative, pessimistic perspective.

Researches need to explore main, interaction and mediation effects to produce one or more complete models for performance enhancement. In sports, hundredths of a second or tenths of an inch is important for the athlete because it separates the champions from the mediocre athletes. Therefore athletes and coaches need to understand how these variables affect athletic performance and these variables need to be given attention in developing training strategies, so that they take their game to the next level and further improve performance standards.

AIM

The present study aims to explore the relation between the variable Optimism, Athletic performance, and Positive coping. This study also verifies the mediating effect of positive coping on the relationship between Optimism and athletic performance.

METHODOLOGY

The methodology part outlines the way the research problem has been formulated and the procedures adopted to verify the problem.

Sample : The sample included 148 athletes randomly chosen from different schools and colleges in Kerala participating in district state and national levels under the age range of 16-19.

Athletic performance – This was measured by converting the obtained data to standard t scores. Some of the events (Sprint events) were measured in terms of time and Jump and throw events were measured in terms of distance. Hence the obtained raw scores were converted to

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standard t scores and when the improvement was in terms of reduction in time, the obtained score was reversed to make it positive.

Tools used for the study- The Life Orientation test Revised, developed by Scheier, Carver, & Bridges, (1994). The test retest reliability ($r = .68$) and the internal reliability (Cronbach's $\alpha = .78$) are sufficient for the uni-dimensional use of LOT-R. Correlations between the LOT-R and related measures were found to be not too strong.

The Cognitive emotion regulation Questionnaire Nadia Garnefski, Vivian Kraaij and Philip Spinhoven (2001). All nine coping strategies were measured by four items on a 5-point Likert scale ranging from 1 (almost never) to 5 (almost always). Research indicated that the reliability and validity coefficients of the scale ranged from 0.81 to 0.85, except for catastrophizing which had an alpha-coefficient of 0.64.

Statistical analysis- The analysis was done using SPSS version 20. The main analyses used were Regression analysis for finding predictor variables and Sobel test was done as a confirmatory test.

RESULTS AND DISCUSSION

Through the present study the investigator tried to verify the mediating effect of coping style on Optimism performance relationship. The obtained data were scored and analyzed properly to draw a meaningful inference. The found results are discussed in the following sessions. In order to test the mediation effects proposed in this study, Baron and Kenny's (1986) linear regression method was used. To verify the existence of a mediation effect, the following conditions were satisfied. The predictor variable should affect the mediator variable in the first regression equation, the predictor variable should be affected by the dependent variable in the second equation and the mediator variable should affect the dependent variable in the third regression equation.

Table 1 : *Hierarchical regression Predicting performance from Optimism and Positive coping*

Model	Predictors	β	R^2	ΔR^2	F	ΔF
1	Optimism	.328*	.108	.108	17.594*	17.594*
2	Optimism	.174	.171	.064	15.002*	11.182*
	Positive coping	.296*				

* $p < .01$

Results of the regression analysis presented in the table 1 indicate that Optimism is found to be a significant predictor of performance in the first hierarchy, $\beta = .328$, $p < .01$, Model 1. But, the significance of optimism $\beta = (.174$, $p > .05$, Model 2) was reduced while including Positive coping ($\beta = .296$, $p < .01$, Model 2) as another significant predictor in the second hierarchy. Introduction of positive coping explain an additional contribution of 6.4 percentages of changes in the performance ($\Delta R^2 = .064$). This change indicates a possibility of medication effect of Positive coping on the relationship among Optimism and performance.

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Further Confirmation of mediation effect was done testing the present model using Sobel test (Sobel, 1982). The purpose of this test is to verify whether a mediator carries the influence of an independent variable to a dependent variable. The reason for complementing this analysis with this methodology is that it permits evaluating more directly the indirect effects, and may be regarded as a complementary analysis of the mediation steps proposed by Baron and Kenny (1986). Sobel Test is also characterized as being a restrictive test, and as so, assures that the verified results are not derived from collinearity issues.

Table 2: Table indicating the 'z' value obtained from the Sobel test

	Coefficient	Standard error	'z' value
Effect	0.668	0.221	3.023*
* P< .05			

In the present study, the test value verified was ($Z= 3.023$; $p=0.002$) significant at 0.01 level. This indicates a perfect significant mediation effect of coping style on optimism- performance relationship.

Optimism is a disposition or tendency to look on the more favorable side of events or conditions and to expect the most favorable outcome. Individuals with an optimistic explanatory style consistently outperform those with a pessimistic explanatory style. [Seligman, (1990); Hanrahan & Grove (1990)]. Optimism enhances motivation, persistence and performance (Carver & Scheier, 2002b). People who view desired outcomes as attainable continue to put in efforts to attain those outcomes, even when doing so is difficult. Fry (1995) found that optimists appraised daily hassles differently than did pessimists and optimistic women expected gain or growth from such events reflecting the use of positive coping strategies.

According to Lazarus & Folkman (1984) "coping" should be viewed as a process which is dynamic, depending upon the individual's evaluation of a given situation. An optimist always evaluates the situation in a more favorable manner and use positive strategies to cope with the situation. Evidences also indicate that people with an optimistic attributional style not only try harder, but may actually enhance their performance after receiving negative feedback (Gordon and Kane, 2001). Positive Coping styles are predictive of lower levels of worry, anxiety, and stress, which, help the person in attaining personal growth (Carver et al., 1989) and are positively associated with self-esteem, and negatively related to anxiety (Garnefski et al., 2001). people who are optimistic may take active steps to ensure the positive quality of their future. This would be much the same as engaging in problem-focused coping, except there is no particular stressor threatening the person. Therefore it is possible that a person with an optimistic explanatory style makes use of positive coping strategies which leads to better performance.

CONCLUSION

Positive coping styles are found to mediate the Optimism Performance relationship. Which means that when individuals are optimistic they tend to use positive coping strategies which indirectly results in better performance.

IMPLICATIONS

This study implies that people who are optimistic tend to use positive coping strategies like acceptance, positive refocusing, positive reappraisal and refocus on planning more frequently. The cumulative effect of using positive coping strategies in a range of problem situation would lead to better athletic performance. An important foundation of this study relates to the proposition that optimism and coping styles could be taught in a more direct fashion than personality or intelligence. Hence interventions to enhance optimism and to teach positive coping skills at an early age should be done so that athletes instead of using maladaptive coping skills make use of positive coping skills. This could reduce susceptibility to both acute and chronic forms of stress in sport. Coaches also need to identify the sport specific nature of coping mechanisms, which will be useful for developing the athlete's performance.

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Does Power and Approval Motives Regulate Adolescents' Altruism?

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ABSTRACT:

The present paper discusses the association of power and approval motives with adolescent altruistic behaviour. Gender difference was also tried to calculate. The present study comprised of 140 students (70 boys and 70 girls) of age range 13-19 years. Participants were given Self-report Altruism Scale, Power Motive Scale, and Approval Motive Scale. Results indicate that altruism is positively correlated with approval motive and negatively correlated with power motives. Results also revealed significant negative prediction of altruism by Power motive and significantly positively predicted by Approval motive. No gender difference was found in all three variables. Results of the present study will be empirically discussed.

Keywords: *Altruism, Power and Approval Motives, Adolescence*

INTRODUCTION:

Anyone wishing to be in power equally requires approval then only altruism can flourish. A recent example of this comes from the widespread protest by citizens across India against corruption. The primary focus of the movement was to ensure a strong Lokpal Bill. The Jan Lokpal Bill (Citizen's Ombudsman Bill) is a draft anti-corruption bill drawn up by prominent civil society activists. The bill can be seen as an altruistic act against corruption. Initially the government by applying power tried to crush the movement. But owing to popular upsurge in favour of Anna Hazare in his fight against corruption, government later bowed and accepted the major demands of team Anna. Thus, to regain the lost approval of people, government finally committed to the enactment of a strong and effective anti-corruption Lokpal bill, giving way to altruism. As in this example, altruism in the human species takes place in a number of contexts and in all known cultures (see, for example, Gouldner, 1960). Any complete list of human altruism would contain the following types of altruistic behavior: (1) helping in times of danger (e.g. accidents, predation, intraspecific aggression; (2) sharing food; (3) helping the sick, the wounded, or the very young and old; (4) sharing implements; and (5) sharing knowledge.

All such forms of behaviour often meet the criterion of small cost to the giver and great benefit to the taker (Trivers, 1971). Psychologically altruistic behaviour may be defined as behaviour that promotes the welfare of others without conscious regards for one's own self -

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-interest (Hoffman, 1978). Psychologists have long assumed that the motivation for all intentional action, including all action intended to benefit others, is egoistic (Batson & Shaw, 1991). People benefit others because, ultimately, to do so benefits them. We help because we have no choice, because it is expected, or because it is in our own best interest.

We may do a favour to friend because we do not want to lose the friendship or we expect to see the favour reciprocated or at least win the approval. It is always possible when viewing an example of human action that appears to be motivated by an interest in the welfare of the others to, adduce a hidden, or unconscious motive (e.g., social approval, self-esteem) as contributing the real source of such behaviour. Thus the altruism reflects an egoistic motive such as social approval. This is counter indicated, however, by the finding that people are more likely to help when there is no witness present (e.g., Darley & Latane, 1968). Social approval sometimes acts as a reward that facilitates pro-social behaviour (Deutsch & Lamberti, 1986).

Crown and Marlowe (1964) have conceptualized approval motive as the desire of individuals to try to achieve favourable evaluations from other member of society. Strickland (1977) has stated that the approval motivated individual responds to his need to gain acceptance, to obtain dependency gratification, and/or status by engaging in approval seeking behaviours in particular situations through positive self presentation and denial of inadequacies. In other words people describe themselves in favourable, socially desirable terms in order to achieve the approval of others.

We would thus expect if approval motive underlie altruistic action, that people tend to help when approval motives are aroused. There should thus be a positive relationship between approval motive and altruism.

Power motive is one of the social motives based on McClelland's theory of human motivation: a concern for impact, which is associated with a need to acquire social status and prestige (McClelland, Davis, Kalin & Wanner, 1972; McClelland 1975). Power motive refers to individual differences in the human tendency to be dominant and to achieve control over means that can be used to influence other individuals (Veroff, 1957). Striving for status, dominance, superiority, or controlling positions are thus typical of manifestations of the power motive (Winter, 1973).

The motives are thought to tap dispositions and processes operating outside of conscious awareness; therefore, they have been termed "implicit motives" (McClelland, Koestner, & Weinberger, 1989, p. 690). The motives tend to "predict spontaneous behavioural trends over time" and are expressed in terms of needs like need for Power (n-Power) (McClelland et al., 1989, p. 691; McClelland, 1975). This n-Power can only be satisfied when one is able to make decisions or take actions that affect others' lives (McClelland. 1975; Winter. 1973; Winter, 1992). Although Power typically has been cast in a dark shadow, some have argued that the motivation for power can drive prosocial influence as well (Magee & Langner, 2008). Need

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for power is thought to have a profound effect on thought and behaviour. Yet, little is known about relationship of power and altruism. But if we dig deeper, understanding whether individuals want to serve others or serve themselves through their influence, we might be able to predict such relationship.

We address this gap in the literature by noting an important relationship that has been lesser investigated in recent research on power motivation. In line with the literature, there should thus be a positive relationship between power motive and altruism.

Recently psychologists have studied altruistic behaviour in order to show what factors induce or inhibit such behaviour. Fewer attempts have been made to show various motives affecting altruistic behaviour. The aim of present study is twofold, it intends to verify empirically whether power and approval, as intrinsic motivation able to crowd out another intrinsic motivation, i.e. altruism, and whether the way in which individuals interact in any context is able to affect each other regarding preferences and the aggregate behaviour of a group of heterogeneous agents. Thus it is worth addressing the question by considering the relationship as well as dependence of altruistic behaviour on two motives, n-Power and n-Approval. Some interesting and recent contributions which analyse similar although different question that is Competition for power and altruism (Bosco, 2009), Does Social Approval Increase Helping? (Deutsch & Lamberti, 1986), confirm that the issue is of interest and deserves more careful attention.

METHODOLOGY

Participants

The present study was carried out with 140 adolescents (70 boys and 70 girls) from 13 to 19 year age from different schools of Varanasi District. The participants for the present study were purposively selected from the middle class families; on the basis of family income.

Measures

Self-report Altruism Scale

The scale originally developed by Rushton, Chrisjohn and Fekken (1981). Hindi version of Altruism Scale was developed by Khanna, Singh and Rushton (1993). The scale consists of 20 five point Likert type items. The reliability of the scale was found 0.83 and the validity of the scale was reported 0.45.

Power Motive Scale

This scale was developed by Dhapola and Singh (1990). The scale consists of 32 Yes-No type items which assesses the overall power motivation of an individual. The test-retest reliability (Chronbach's alpha) of this scale was found 0.72.

Approval Motive Scale

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This was developed by Tripathi and Tripathi (1980). The scale contains 72 items with three alternatives (Yes, No and Undecided). The test-retest reliability was found .82, and .92 were establish by split-half method.

RESULTS

Analyses were done on the basis of responses of participants on different measures. Initially we calculated the descriptive nature of data and further we used regression analysis to examine the responses of boys and girls on different scales.

Table 1 presents the mean scores, SD and t-values of total sample on different measures.

Table 1: Descriptive scores and t-values of total sample on different measures (N = 140)

	Gender	N	Mean	S. D.	t-values
Altruism	Male	70	78.29	12.15	0.74
	Female	70	76.87	10.42	
Power Motive	Male	70	20.24	4.49	0.51
	Female	70	19.86	4.44	
Approval Motive	Male	70	46.17	6.44	1.40
	Female	70	44.36	8.64	

Table 1 shows that although boys scored higher on all three variables (altruism, power motive, and approval motive), no significant gender difference was found on any variable; power need ($t = .51, p > .05$), approval need ($t = 1.40, p > .05$) and altruistic behaviour ($t = .74, p > .05$).

Table 2 presents the outcomes of linear regression analyses of boys and girls for Power and Approval motives on Altruism measure.

Table 2: Outcome of linear regression analysis for power and approval motives on altruistic behaviour

	Altruism				
Predictors	R	R Square	Adjusted R Square	F	Beta
Approval Motive	.258	.067	.060	9.87**	.258**
Power Motive	.172	.030	.023	4.21*	-.172*

* $p < .05$, ** $p < .01$

Results of regression analyses showed significant prediction of power and approval motives for altruistic behaviour. Power motive significantly negatively predicting altruism

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scores, ($\beta = -.172$, $t(138) = -2.05$, $p < .05$). Power motive also explains a significant proportion of variance in altruism score, $R^2 = .030$ contributing 3.0% to total variance, ($F(1, 139) = 4.21$, $p < .05$). On the contrary, approval motive significantly positively predicting altruism scores ($\beta = .258$, $t(138) = 3.14$, $p < .01$). Approval motive also explains a significant proportion of variance in altruism score, $R^2 = .067$ contributing 6.7% to total variance, ($F(1, 139) = 9.87$, $p < .01$).

DISCUSSION

The main focus of present study was to examine the relationship of power and approval motives with altruistic behaviour of adolescent boys and girls. Though it was hypothesized that both the motives under study bear positive relationships with altruism, data analyses revealed just opposite result of what was assumed in case of power motive. As far as relationship is concerned, power motive found to be negatively related with altruism. Whereas obtained results confirm the proposed positive relationship between approval motive and altruism among adolescents.

Findings of the present study along with other researches evinced that pro-social behaviour increases with increase in approval motive. (Deutsch & Lamberti, 1986). Analysis also shows that power motive significantly negatively predicts the adolescent's altruistic behaviour. Though there are not sufficient evidences to support this finding, but one of the reasons for obtained negative relationship between power motive and altruism apposite to what was assumed can be attributed to the opposite nature of power and altruism. Power is defined in a very strict sense as "possession of control, authority, or influence over others" (Merriam-Webster Dictionary); completely underlying self serving belief. Whereas altruism have been subsumed under the general term 'pro-social behaviour' (coined by Wispe' (1972) as a counterpart to 'antisocial behaviour') because they are all aimed, at least in part, at benefiting another individual (Warneken & Tomasello, 2009).

Analyses of data showed no significant gender difference in any of the variable under study. However, there is mixed evidence on gender differences in altruism from other studies. In a study it was found that, on average, women are predicted to donate more of both money and time (Simmons, & Emanuele, 2007). Contrary to the finding another study found no significant differences in helping behaviour between male and female subjects (Monk-Turner et. al, 2002). In support to this finding, Eagly and Crowley's (1986) social role theory maintains that the traditional male sex role promotes heroic and chivalrous helping behaviour. Previous studies and original research on the power motive (n Power) in women show no sex differences in the ways in which the power motive is aroused (Winter, 1988). Thus in case of Power motive, the obtained result confirms earlier findings asserting no gender difference in power motive.

Regression analysis showed that power motive significantly negatively predicts the adolescent's altruistic behaviour, whereas approval motive significantly positively predicts their altruistic behaviour. These findings reveals that power and approval motives are imperative predictor of

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altruistic behaviour and balance of both motives are must for enhancing altruism. Therefore adolescents can consciously change the directions of their need for power so that proper blend of n-power and n-approval aroused, then only feelings of altruism can flourish. Clearly, altruism is not simply a matter of how powerful one is, but of how capable one be in gaining approval from others too.

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